



**Catholic Charities
of Southern Missouri**

Reaching Out. Providing Hope. Changing Lives.

Alternatives to Abortion Program Services

Request for Proposal

RFPS30034901600477

Submitted by:

Catholic Charities of Southern Missouri, Inc.

Proposed Service Regions: 7, 8 & 9

Kleffner, Julie

From: Kleffner, Julie
Sent: Friday, January 06, 2017 10:08 AM
To: 'Maura Taylor'
Subject: FW: RFPS30034901700042 Alternatives to Abortion Program Services

Importance: High

Item 3.1.6 of the RFP advises that a proposal submitted in response to RFPS30034901600477 to will be considered an open record pursuant to section 610.021 RSMo. In reviewing the proposal submitted from Catholic Charities of Southern Missouri, Inc, no documents or information were found to have been marked as being proprietary information. If there is any material included within the proposal that was marked as proprietary, and if so, to provide an explanation of what qualifies such material to be held as confidential pursuant to the provisions of section 610.021, RSMo. Catholic Charities of Southern Missouri, Inc. shall understand that the determination of such material being held as a closed record shall be solely with the State of Missouri.

Julie Kleffner, CPPB
Division of Purchasing
Harry S Truman Bldg, Room 630
Post Office Box 809
Jefferson City MO 65102-0809
Phone: 573-751-7656
Fax: 573-526-9816



STATE OF MISSOURI
OFFICE OF ADMINISTRATION
DIVISION OF PURCHASING (PURCHASING)
REQUEST FOR PROPOSAL (RFP)

SOLICITATION/OPPORTUNITY (OPP) NO.: RFPS30034901600477

TITLE: Alternatives to Abortion Program Services

ISSUE DATE: 2/17/16

REQ NO.: NR 300 30006000002

BUYER: Julie Kleffner

PHONE NO.: (573) 751-7656

E-MAIL: Julie.Kleffner@oa.mo.gov

RETURN PROPOSAL NO LATER THAN: March 29, 2016 AT 2:00 PM CENTRAL TIME (END DATE)

VENDORS ARE ENCOURAGED TO RESPOND ELECTRONICALLY THROUGH
[HTTPS://MISSOURIBUYS.MO.GOV](https://missouribuy.mo.gov) BUT MAY RESPOND BY HARD COPY (See Mailing Instructions Below)

MAILING INSTRUCTIONS: Print or type Solicitation/OPP Number and End Date on the lower left hand corner of the envelope or package. Delivered sealed proposals must be in the Purchasing office (301 W High Street, Room 630) by the return date and time.

	(U.S. Mail)	or	(Courier Service)
RETURN PROPOSAL TO:	PURCHASING		PURCHASING
	PO BOX 809		301 WEST HIGH STREET, RM 630
	JEFFERSON CITY MO 65102-0809		JEFFERSON CITY MO 65101-1517

CONTRACT PERIOD: Effective Date of Contract through May 31, 2017

DELIVER SUPPLIES/SERVICES FOB (Free On Board) DESTINATION TO THE FOLLOWING ADDRESS:

Office of Administration
Commissioner's Office
State Capitol Building, Room 125
Jefferson City MO 65101

The vendor hereby declares understanding, agreement and certification of compliance to provide the items and/or services, at the prices quoted, in accordance with all requirements and specifications contained herein and the Terms and Conditions Request for Proposal (Revised 10/19/15). The vendor further agrees that the language of this RFP shall govern in the event of a conflict with his/her proposal. The vendor further agrees that upon receipt of an authorized purchase order from the Division of Purchasing or when a Notice of Award is signed and issued by an authorized official of the State of Missouri, a binding contract shall exist between the vendor and the State of Missouri.

SIGNATURE REQUIRED

DOING BUSINESS AS (DBA) NAME Catholic Charities of Southern Missouri	LEGAL NAME OF ENTITY/INDIVIDUAL FILED WITH IRS FOR THIS TAX ID NO. Catholic Charities of Southern Missouri, Inc.
MAILING ADDRESS 424 E. Monastery Street	IRS FORM 1099 MAILING ADDRESS 424 E Monastery Street
CITY, STATE, ZIP CODE Springfield, MO 65807	CITY, STATE, ZIP CODE Springfield, MO 65809

CONTACT PERSON Maura Taylor		mtaylor@ccsomo.org	
PHONE NUMBER 417-720-4213		FAX NUMBER 417-720-4216	
TAXPAYER ID NUMBER (TIN) 80-0455890	TAXPAYER ID (TIN) TYPE (CHECK ONE) <input checked="" type="checkbox"/> X FEIN <input type="checkbox"/> SSN	VENDOR NUMBER (IF KNOWN) 8004558900 0	
VENDOR TAX FILING TYPE WITH IRS (CHECK ONE) <input type="checkbox"/> Corporation <input type="checkbox"/> Individual <input type="checkbox"/> State/Local Government <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor <input checked="" type="checkbox"/> X IRS Tax-Exempt			
AUTHORIZED SIGNATURE 		DATE 3/25/16	
PRINTED NAME Maura Taylor		TITLE Executive Director	

CATHOLIC CHARITIES OF SOUTHERN MISSOURI, INC.

Alternatives to Abortion
Request for Proposal

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VENDOR QUALIFICATION

EXHIBIT A:

**VENDOR – CATHOLIC CHARITIES OF SOUTHERN MISSOURI, INC.
SUBCONTRACTOR – WHOLE KIDS OUTREACH**

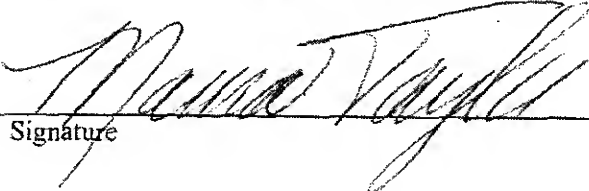
EXHIBIT ACERTIFICATION REGARDING COMPLIANCE WITH SECTION 188.325, RSMO

Regarding performing, inducing, or assisting in the performing or inducing of or referring for abortions

The vendor certifies, by submission of the proposal and by signing below, that the vendor is not an organization, or an affiliate of organizations, that "perform or induce, assist in the performing or inducing of or refer for abortions".

Maura Taylor Executive Director-Catholic Charities of Southern Missouri

Name and Title of Authorized Representative



Signature

3/25/16

Date

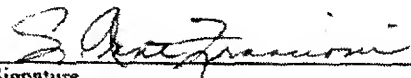
RFPS30034901600477

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EXHIBIT ACERTIFICATION REGARDING COMPLIANCE WITH SECTION 188.325, RSMO*Regarding performing, inducing, or assisting in the performing or inducing of or referring for abortions*

The vendor certifies, by submission of the proposal and by signing below, that the vendor is not an organization, or an affiliate of organizations, that "perform or induce, assist in the performing or inducing of or refer for abortions".

Sr. Anne Francioni, Executive Director Whole Kids Outreach
Name and Title of Authorized Representative


Signature

March 25, 2016
Date

COST

PRICING PAGES FOR REGIONS 7, 8 & 9

PRICING PAGE, continued

GEOGRAPHIC REGION 7		
Item #	Description	Pricing
PROFESSIONAL CASE MANAGEMENT		
85	Face-to-Face Professional Case Management	\$__NA__ firm, fixed price per hour
86	Home Visit Professional Case Management	\$__NA__ firm, fixed price per hour
87	Non Face-to-Face Professional Case Management	\$__NA__ firm, fixed price per hour
NON-PROFESSIONAL CASE MANAGEMENT		
88	Face-to-Face Non-Professional Case Management	\$__NA__ firm, fixed price per hour
89	Home Visit Non-Professional Case Management	\$__NA__ firm, fixed price per hour
90	Non Face-to-Face Non-Professional Case Management	\$__NA__ firm, fixed price per hour
PRENATAL PARENT EDUCATION AND PARENTING SKILLS TRAINING		
91	Prenatal Parent Education and Parenting Skills Training/Classes, per individual client	\$__NA__ firm, fixed price per hour, per client
92	Prenatal Parent Education and Parenting Skills Training/Classes, more than one client in a group setting	\$__NA__ firm, fixed price per hour, per group
ESTABLISHING AND PROMOTING RESPONSIBLE PATERNITY TRAINING		
93	Establishing and Promoting Responsible Paternity Training/Classes, per individual client	\$__NA__ firm, fixed price per hour, per client
94	Establishing and Promoting Responsible Paternity Training/Classes, more than one client in a group setting	\$__NA__ firm, fixed price per hour, per group
HOUSING		
95	Residential Care	\$__100__ firm, fixed price per day (maximum \$100)
96	Emergency Shelter Housing	\$__60__ firm, fixed price per day (maximum \$60)
97	Housing Assistance	\$__ guaranteed not-to-exceed price per client, per month (maximum \$600)
ADMINISTRATIVE COST		
98	Administrative Cost	__8__ % firm, fixed percentage (maximum 8%)

PRICING PAGE, continued

GEOGRAPHIC REGION 8		
Item #	Description	Pricing
PROFESSIONAL CASE MANAGEMENT		
99	Face-to-Face Professional Case Management	\$ <u>70</u> firm, fixed price per hour
100	Home Visit Professional Case Management	\$ <u>70</u> firm, fixed price per hour
101	Non Face-to-Face Professional Case Management	\$ <u>70</u> firm, fixed price per hour
NON-PROFESSIONAL CASE MANAGEMENT		
102	Face-to-Face Non-Professional Case Management	\$ <u>25</u> firm, fixed price per hour
103	Home Visit Non-Professional Case Management	\$ <u>25</u> firm, fixed price per hour
104	Non Face-to-Face Non-Professional Case Management	\$ <u>25</u> firm, fixed price per hour
PRENATAL PARENT EDUCATION AND PARENTING SKILLS TRAINING		
105	Prenatal Parent Education and Parenting Skills Training/Classes, per individual client	\$ <u>25</u> firm, fixed price per hour, per client
106	Prenatal Parent Education and Parenting Skills Training/Classes, more than one client in a group setting	\$ <u>25</u> firm, fixed price per hour, per group
ESTABLISHING AND PROMOTING RESPONSIBLE PATERNITY TRAINING		
107	Establishing and Promoting Responsible Paternity Training/Classes, per individual client	\$ <u>25</u> firm, fixed price per hour, per client
108	Establishing and Promoting Responsible Paternity Training/Classes, more than one client in a group setting	\$ <u>25</u> firm, fixed price per hour, per group
HOUSING		
109	Residential Care	\$ <u>NA</u> firm, fixed price per day (maximum \$100)
110	Emergency Shelter Housing	\$ <u>NA</u> firm, fixed price per day (maximum \$60)
111	Housing Assistance	\$ <u>600</u> guaranteed not-to-exceed price per client, per month (maximum \$600)
ADMINISTRATIVE COST		
112	Administrative Cost	<u>8</u> % firm, fixed percentage (maximum 8 %)

PRICING PAGE, continued

GEOGRAPHIC REGION 9		
Item #	Description	Pricing
PROFESSIONAL CASE MANAGEMENT		
113	Face-to-Face Professional Case Management	\$ <u>70</u> firm, fixed price per hour
114	Home Visit Professional Case Management	\$ <u>70</u> firm, fixed price per hour
115	Non Face-to-Face Professional Case Management	\$ <u>70</u> firm, fixed price per hour
NON-PROFESSIONAL CASE MANAGEMENT		
116	Face-to-Face Non-Professional Case Management	\$ <u>25</u> firm, fixed price per hour
117	Home Visit Non-Professional Case Management	\$ <u>25</u> firm, fixed price per hour
118	Non Face-to-Face Non-Professional Case Management	\$ <u>25</u> firm, fixed price per hour
PRENATAL PARENT EDUCATION AND PARENTING SKILLS TRAINING		
119	Prenatal Parent Education and Parenting Skills Training/Classes, per individual client	\$ <u>25</u> firm, fixed price per hour, per client
120	Prenatal Parent Education and Parenting Skills Training/Classes, more than one client in a group setting	\$ <u>25</u> firm, fixed price per hour, per group
ESTABLISHING AND PROMOTING RESPONSIBLE PATERNITY TRAINING		
121	Establishing and Promoting Responsible Paternity Training/Classes, per individual client	\$ <u>25</u> firm, fixed price per hour, per client
122	Establishing and Promoting Responsible Paternity Training/Classes, more than one client in a group setting	\$ <u>25</u> firm, fixed price per hour, per group
HOUSING		
123	Residential Care	\$ <u>100</u> firm, fixed price per day (maximum \$100)
124	Emergency Shelter Housing	\$ <u>NA</u> firm, fixed price per day (maximum \$60)
125	Housing Assistance	\$ <u>600</u> guaranteed not-to-exceed price per client, per month (maximum \$600)
ADMINISTRATIVE COST		
126	Administrative Cost	<u>8</u> % firm, fixed percentage (maximum 8%)

**VENDORS EXPERIENCE AND RELIABILITY AND EXPERTISE OF
PERSONNEL**

EXHIBIT B**VENDOR INFORMATION**

The vendor should provide the following information about the vendor's organization:

I. Provide a brief company history, including the founding date and number of years in business as currently constituted.

Reaching Out. Providing Hope. Changing Lives. Catholic Charities of Southern Missouri (CCSOMO) seeks to improve the lives of the vulnerable by providing quality, compassionate social services which meet local needs. Our vision is to ensure that individuals and families in need receive necessary social services, obtain a sense of hope, and achieve self-sufficiency. CCSOMO was established in 2009 to serve clients in the thirty-nine southernmost counties in Missouri, many the most impoverished in the state. Services have expanded and grown from disaster case management following the 2011 Joplin tornado and springs floods to an agency providing: homeless prevention services in ten Missouri counties (ESG); pregnancy support programs (ATA regions 8 & 9); establishing a Crisis Maternity Home in 2013 for ATA Region 7; Supportive Services for Veteran Families in 36 counties (SSVF); Rapid Rehousing Programs for the homeless; Home Repair and Rebuilding for low-income households and seniors; targeted case management for the developmentally disabled; housing and financial counseling; and more.

Administrative offices and LifeHouse Crisis Maternity Home are located at 424 E. Monastery Street, Springfield, Missouri. Regional offices are located in Cape Girardeau (937 Broadway Ste. 304, 63702 and 1812 Carondelet, Ste. 106, 63701); Sikeston (205 W. Malone Ste. B, 63801); Van Buren (511 Main Street, 63965); Joplin (403 E. 4th St., 64801); and are open 8 am to 5 pm, Monday through Friday. CCSOMO case managers and construction staff meet with clients by appointment in the office, in the home or other site. Evening and weekend appointments can be arranged if necessary. LifeHouse Crisis Maternity Home is a 24/7 facility providing transitional housing and comprehensive social services for homeless pregnant women and their young children.

All CCSOMO programs strive to empower clients through case management to obtain and retain permanent housing and achieve self-sufficiency. The CCSOMO pregnancy support programs provide counseling, support and direct services for pregnant women that lead to healthy outcomes for mom and children and improve the long-term self-sufficiency of the family. CCSOMO's "Healthy Moms, Healthy Babies" began in June 2012 after the ATA contract was awarded to CCSOMO. Whole Kids Outreach (WKO) is a subcontractor.

LifeHouse Crisis Maternity Home opened December 27, 2013 to meet the community need for safe housing for homeless pregnant women and their young children. In slightly over 2 years, 56 women and 11 toddlers/children have been provided safe housing and comprehensive services at LifeHouse and 30 healthy infants born. The LifeHouse program also includes an AfterCare program for women who have transitioned into permanent housing after receiving services and housing at LifeHouse for up to a year after the delivery of their baby. Currently 10 women and 20 children are enrolled in the LifeHouse AfterCare Program.

CCSOMO implemented a new database system in 2015. This case management software program, CaseWorthy, monitors and tracks all client data, record case notes, presenting issues and referrals, and performs assessments that measure benchmarks, assets and expected outcomes. An evidence-based self-sufficiency matrix/assessment tool is built into this software and is incorporated into the process (Arizona Self-Sufficiency Matrix). In addition, all in-house and community resources are listed in the client record. CCSOMO Director of Administration and PQI monitors program results in collaboration with the Project Coordinator.

CCSOMO is in the process of obtaining COA (Council on Accreditation) accreditation. The agency began the initial 18-month process in January to complete a self-evaluation and eventually site visits with the

anticipation of receiving accreditation in recognition of the agency meeting national standards in all areas of operation and programming.

2. **Describe the nature of the vendor's business, type of services performed, etc. Identify the vendor's website address, if any.**

Catholic Charities of Southern Missouri (CCSOMO) provides services and outreach to the thirty-nine southernmost counties in Missouri from its six offices located in Cape Girardeau (two locations), Joplin, Sikeston, Springfield and Van Buren. CCSOMO seeks to improve the lives of the vulnerable by providing quality, compassionate social services that meet local needs. The mission is to ensure that individuals and families receive supportive services, obtain a sense of hope, obtain and retain permanent housing and achieve self-sufficiency. CCSOMO provides a holistic and individualized approach that strives to assist clients in accessing the services they need. Under the Family Strengthening Framework, CCSOMO provides case management services that assist clients in each of the programs listed below.

Homelessness Prevention (ESG and Housing First)

We help those who without our help would become homeless by providing intensive case management services and temporary financial support to overcome their housing crisis and lead to long-term financial stability.

Disaster Response & Long-term Recovery

We provide immediate aid and long-term case management services for survivors of natural disasters, such as tornadoes and flooding.

LifeHouse Crisis Maternity Home

We provide safe shelter, food and clothing as well as comprehensive support services for homeless, pregnant women and their babies for up to a year following birth as the women work to achieve goals of permanent housing and self-sufficiency. The Aftercare program provides former residents who have transitioned to permanent housing with on-going case management and support services for at least two years.

Developmentally Disabled Service Coordination

We help people with developmental disabilities acquire the services and supports they need to maximize their potential and strengthen their level of independence.

Healthy Moms, Healthy Babies Program (ATA)

We provide parenting and pregnancy support for low-income families through pregnancy and up to one year following birth.

Home Repair & Rebuilding for Disaster Survivors and Low-Income Seniors and Families

With the help of volunteer labor, we repair and rebuild homes damaged or destroyed by tornadoes and flooding, and we make needed home repairs for low-income seniors and families.

Support Services for Veterans and their Families (SSVF)

We serve veterans and their families who are homeless or at imminent risk of homelessness through temporary financial assistance, intensive case management services, development of a housing plan, and connection to community resources.

Housing & Financial Counseling (HUD)

Our HUD-certified counselors assist financially distressed individuals and families with education and guidance on budgeting and money management, and provide information needed to obtain, maintain and sustain housing.

Income Tax Preparation Assistance

Our trained volunteers provide free assistance to lower-income individuals and families in preparing and filing tax returns.

Mental Health & Family Counseling

We provide professional counseling services for a wide range of behavioral, emotional and family issues in an atmosphere of caring and support.

SNAP (Supplemental Nutrition Assistance) Enrollment

We help individuals and families determine their eligibility for and file for SNAP benefits, a program which fights hunger and improves the diet and health of children and families.

GoodFinds Resale Shop

The sales proceeds from our Joplin store provide support for our programs, and donations made to GoodFinds supply our clients in need with basic necessities.

Catholic Charities of Southern Missouri's website is www.ccsomo.org. The agency also has a Facebook page (www.facebook.com/CCSOMO).

3. Provide a list of and a short summary of information regarding the vendor's current contracts for similar services.

Catholic Charities of Southern Missouri (CCSOMO) completed its first year of the Veteran Administration's Supportive Services for Veteran Families (SSVF) grant on September 30, 2015 and was renewed for the 2015-2016 year. CCSOMO SSVF case managers cover 36 rural southern counties in Missouri. In the 2014-2015 grant year CCSOMO served 127 Veteran Households (176 individuals) of whom 80% were rapid rehousing clients. Case Managers work with clients to obtain and/or retain permanent housing, provide housing stability case management including accessing community resources, supportive services and benefits (VA, SNAP, and SSI/SSDI). Case managers do outreach in the rural areas to locate homeless individuals and families and offer services. Part of the outreach is to landlords to establish relationships that result in their willingness to rent to many of CCSOMO's hard to place clients. CCSOMO successfully managed the award which included funding for salaries, overhead, administration and veteran financial assistance and expended the \$620,238 grant award by the September 30th deadline. CCSOMO's SSVF program also met all the required outcomes and measurements required in the grant contract. The renewal for 2015-2016 is \$620,238.

CCSOMO received \$313,300 in Emergency Solutions Grant (ESG) funding to provide housing stability case management services and homeless prevention services in 2015 for 10 counties in Missouri. CCSOMO received ESG funding from the Missouri Housing Development Commission starting in the 2013-2014 grant year for six counties and has grown to ten counties in 2015 with most being rural. Under its ESG homeless prevention program, CCSOMO provides housing search and stability case management as well as housing financial assistance—rent deposits/arrears, rent and utility assistance—or households with income under 30% AMI. CCSOMO case managers work with households to retain permanent housing and become self-sufficient by increasing household income through increased employment and/or accessing

benefits. CCSOMO has SOAR-trained staff to assist clients in completing disability applications as well as SNAP applications. CCSOMO case managers collaborate and work with local community, state and federal agencies to assist the client in accessing benefits such as Veterans Administration benefits, TANF, SNAP, legal services, state childcare assistance, and housing (Section 8, VASH, Shelter-Plus Care). Case Managers refer and accept referrals from local non-profit/social service providers to assist in the delivery and access to needed client supportive services including mental health and substance abuse treatment.

MHTF awarded CCSOMO a \$32,500 grant for rental assistance in 2015-2016 year for 35 counties in southern Missouri. In 2014-2015 and 2015-2016 CCSOMO awarded grants for low-income home repairs for homeowners with income under 50% AMI in 35 Missouri counties.

CCSOMO received a \$50,000 grant from the Missouri Department of Corrections for a re-entry housing program for 2015-2016. Catholic Charities of Southern Missouri Reentry Housing Assistance Program provides housing stability case management and services, financial assistance for rent and deposits, referrals for other criminogenic needs for 18 high-risk offenders under the supervision of Probation & Parole in the Cape Girardeau community and surrounding areas.

CCSOMO receives partial funding from a HUD Housing Counseling grant for our Housing and Financial Counseling Program as a sub-grantee under CCUSA through March 31, 2016. CCSOMO's HUD-certified housing and financial counselors work with CCSOMO case managers to provide budgeting, assistance with establishing and improving credit and getting banked, foreclosure prevention services and financial literacy education so clients can increase their financial success and work towards self-sufficiency.

CCSOMO was the largest provider of Disaster Case Management Services in Missouri under the FEMA grant awarded to the state in March 2012 for spring storms in 2011 (DR-1980). CCSOMO served 21 counties in southwest, south central and southeast Missouri, including those affected by the Joplin tornado, with rapid rehousing, housing stability and disaster case management, and home repair/rebuilding services. The FEMA grant required agency outreach to potential clients, collaboration with other social service agencies, volunteer coordination and the supervision and monitoring of 15 trained CCSOMO case management professionals who worked with disaster affected clients from March 2012-May 2013 under this grant. In Lawrence, Newton, McDonald and Jasper counties, CCSOMO provided 569 households with case management services that included recovery plans for housing stability and self-sufficiency. In south-central and southeast Missouri, 16 rural counties were served and 162 flood survivor households received disaster case management and/or home repair/rebuilding assistance.

CCSOMO enters SSVF and ESG client data into the HMIS (Homeless Management Information System) as required by grants and utilizes the system for grant reporting. CCSOMO has also chosen to enter additional client data for other CCSOMO homeless programs not covered by grants so the local Continuum of Care has accurate data for the area.

4. List, identify, and provide reasons for each contract/client gained and lost in the past two (2) years.

CCSOMO was renewed on October 1, 2015 for the 2015-2016 SSVF grant to serve homeless veteran families and those at-risk of homelessness. CCSOMO was successful in reaching the target of 125 veteran households, spending funds according to grant guidelines and due dates, and meeting grant outcomes and audit requirements. CCSOMO has submitted a renewal application for 2016-2017. The agency completed its first A-133 audit with no findings. The agency 2014-2015 audit and A-133 are attached.

CCSOMO was awarded the Emergency Solutions Grant for 2016 based on past success (3 years) of meeting grant requirements and deadlines for CCSOMO's homeless prevention program.

CCSOMO was awarded a MHTF grant for 2016-2017 year for rental and emergency assistance, home repair program, and operating costs for housing stability case management. In addition, funding was awarded for the first time for the CCSOMO Housing First Program.

CCSOMO was a sub-grantee recipient under Catholic Charities USA for the agency's Housing and Financial Counseling Program funded through HUD. CCSOMO counselors are HUD-certified and the agency met all grant requirements as a sub-grantee (October 1, 2014 – March 31, 2016). CCUSA is applying for the 2016-2017 year and CCSOMO expects to be a sub-grantee if the grant is awarded to CCUSA.

CCSOMO was a sub-grantee under CCUSA for a rural youth mentoring program through the Department of Justice from October 2012 through October 2015. CCSOMO discontinued the program due to difficulty of finding rural youth mentors in four southeast Missouri counties.

Some of CCSOMO's contracts require a match and/or leverage of resources. Catholic Charities of Southern Missouri when appropriate leverages funds from multiple sources in order to provide more programming and services to the vulnerable in southern Missouri. Leveraging resources allows CCSOMO to serve more clients in need of services.

5. In the table below, indicate if the vendor is a not-for-profit entity that promotes one or more of the following four (4) purposes established by Congress under 42 U.S.C. Section 601 of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996. If a not-for-profit entity, describe past experience relative to the four (4) purposes.

Not-for-profit entity that promotes one or more of the following (4) purposes: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Purposes Identify specific information about experience:	Clearly identify and describe the experience
Providing assistance to needy families so that children may be cared for in their own homes or in the homes of relatives	Our housing stability programs are aimed at helping at risk families maintain or retain permanent housing, and develop self-sufficiency. The LifeHouse Crisis Maternity Home Program works with residents to achieve self-sufficiency. This includes assistance with finding safe affordable housing, education on budgeting, and child care classes to include working with Parents as Teachers and Early Head Start, the local library, and the health department. LifeHouse also works on reunification for children of residents that have been placed in state care. This takes the child out of foster care and back with the mother and extended family. LifeHouse also assists high-risk mothers to keep their infants after delivery through education and resource support.
Ending the dependence of needy parents on government benefits by promoting job preparation, work, and marriage	Our family strengthening programs work with families to achieve self-sufficiency through housing stability; job skill development; work; and accountability. LifeHouse provides education through assistance with GED completion, vocational training and college enrollment, resume and life skill training. Partnership with the Missouri Career Center and Ozark Technical College. Education to assist parents to find safe quality child care, so they can work. Transportation assistance and teaching individuals to ride public transit, learn how to drive, and to save for their own transportation.
Preventing and reducing the incidence of out-of-wedlock pregnancies and establish annual	LifeHouse provides pre-natal and post-natal education. Connection to medical care and

numerical goals for preventing and reducing the incidence of these pregnancies	education. Relationship classes, self-esteem, group and individual onsite counseling, and other behavioral classes.
Encouraging the formation and maintenance of two-parent families	Referral to the Good Dads program and other local resources for father specific education. LifeHouse works with our resident mothers and the infants father to provide visitation as appropriate.

6. Describe the structure of the organization including any board of directors, partners, top departmental management, corporate organization, corporate trade affiliations, any parent/subsidiary affiliations with other firms, etc.

CCSOMO is a public, 501(c)3, nonprofit, faith-based corporation. The Board of Directors has power and authority to govern the affairs of the corporation. The Executive Director serves as the chief executive officer and is responsible for management subject to the policy direction of the Board of Directors. The Board of Directors is composed of up to 18 members who bring expertise from a variety of professions and represent different regions of southern Missouri. The Board is responsible for the policy, strategic plans, budget, financing and governance of the corporation. The executive and finance/audit committee meet bi-monthly and make recommendations to the Board. Board members and others may serve on additional board committees including: Board Development/Nominating, Fund Development, HR and Programs, and Evaluation Committee. One member of the board is a domestic violence survivor and was at imminent risk of homelessness.

Members of the leadership team report to the Executive Director and include Finance, HR and Administration, Communication, Development, Programs and a Regional Director. In addition, Program Supervisors and Managers are included on regular bi-weekly calls. Current number of staff for all offices stands at 70.

CCSOMO incorporates the GAAP as adopted by the AICPA in its accounting practices regarding internal controls, budget/accounting controls, cash management, procurement rules, property controls and audits. Controls are in place to guard against detection risk, control risks and inherent risks. Independent audits by BKD are done annually and conform to A-133 requirements as issued by OMB. CCSOMO's governing board and finance committee meet bi-monthly and review financial statements and budget reports. Funds that are restricted and designated for purposes are listed on the ledger. The Executive Director reviews budget reports and financial statements monthly. The Executive Director approves all material operating decisions such as hiring, wage adjustments, large expenditures and capital investments. The Director of Finance maintains custody of the general ledger, produces finance and budget reports, and ensures that proper segregation of general accounting functions are being implemented and maintained. The Director of Administration and PQI works with the accounting department to ensure that all program and financial requirements are being met under all grant contracts as well as all grant service performance and outcome requirements.

Catholic Charities of Southern Missouri pays dues and is a member of the Catholic Charities USA Network. CCSOMO's Executive Director serves on the CCUSA Directors Executive Committee and chairs the Leadership Committee. Catholic Charities of Southern Missouri is also a partner in Catholic Charities of Missouri LLC. The CCSOMO Executive Director serves on the Board of this Missouri partnership.

7. Provide a list summarizing any pending or final legal proceedings involving you or your company that took place in any court of law, administrative tribunal or alternative dispute resolution process that was filed, settled or gone to final judgment within the last three (3) years. The summary need not disclose confidential information of a disputed allegation of fact or law, but must contain the allegations made and/or contested or findings of the court of law, tribunal or dispute resolution process. Failure to provide a full and accurate summary of legal proceedings may result in rejection of the proposal or termination of any subsequent contract.

None.

EXHIBIT B**SUBCONTRACTOR INFORMATION**

The vendor should provide the following information about the vendor's organization:

- 1. Provide a brief company history, including the founding date and number of years in business as currently constituted.**

Whole Kids Outreach was created in 1999 as the result of a yearlong reorganization and restructuring process of its parent organization, Whole Health Outreach (WHO). With the assistance of Saint Louis University School of Public Health (SLUSPH), the staff and board of Whole Health Outreach studied the needs of the birth to three-year-old population in service area in an attempt to identify not only the community's needs, but also to identify responses to those needs which would be consistent with the mission of Whole Health Outreach. The study included input on the developmental needs of this population and possible intervention strategies by both WHO and other service providers in the community. After considerable discernment and dialogue, the creation of a new organization – Whole Kids Outreach – that specifically targeted the improvement of the health and well-being of women, children (focusing on prevention) and families was created.

Whole Kids Outreach has been in business as currently constituted for seventeen (17) years.

- 2. Describe the nature of the vendor's business, type of services performed, etc. Identify the vendor's website address, if any.**

The focus of Whole Kids Outreach (WKO) is to broadly address the many influences which contribute to abuse and neglect, as well as the health of children within their family structures. To enable a "whole" child to develop, WKO has created diverse programs and activities to educate and strengthen children and their parents to live holistic, productive lives that are free from preventable abuse, neglect and illness. The primary programs of WKO are:

Home Visiting/Outreach Programs—Healthy Families America and the Maternal Child Nurse Program

Center-based Programs—Summer Day Camp, Moms Day Out, Riding Program, After School Program, Children's Weekends, Community Events, Volunteer Program and Christmas Store (full descriptions of programs can be found on www.wholekidsoutreach.org).

- 3. Provide a list of and a short summary of information regarding the vendor's current contracts for similar services.**

State of Missouri Home Visitation Program Services—provides Healthy Families America home visiting services.

- 4. List, identify, and provide reasons for each contract/client gained and lost in the past two (2) years.**

State of Missouri Home Visitation Program Services renewed for Fiscal years 2015 and 2016.

- 5. In the table below, indicate if the vendor is a not-for-profit entity that promotes one or more of the following four (4) purposes established by Congress under 42 U.S.C. Section 601 of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996. If a not-for-profit entity, describe past experience relative to the four (4) purposes.**

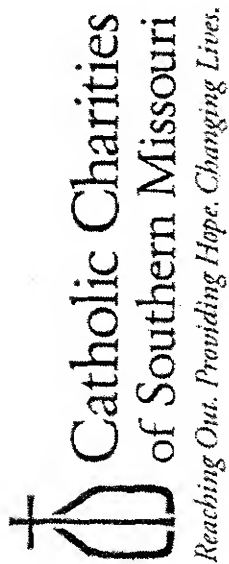
Not-for-profit entity that promotes one or more of the following (4) purposes: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Purposes Identify specific information about experience:	Clearly identify and describe the experience
Providing assistance to needy families so that children may be cared for in their own homes or in the homes of relatives	Provision of Healthy Families America home visiting program, utilizing the Growing Great Kids curriculum. http://www.healthyfamiliesamerica.org/
Ending the dependence of needy parents on government benefits by promoting job preparation, work, and marriage	Each families' work status, income, educational attainment level and work readiness skills are tracked. Individual Family Goal Plans are created to assist parents to develop strategies to secure gainful employment.
Preventing and reducing the incidence of out-of-wedlock pregnancies and establish annual numerical goals for preventing and reducing the incidence of these pregnancies	WKO serves clients who are either already pregnant or parenting.
Encouraging the formation and maintenance of two-parent families	WKO utilizes the Growing Great Families supplemental workbooks in the Growing Great Kids curriculum, which has learning modules on building and sustaining healthy parenting relationships.

6. Describe the structure of the organization including any board of directors, partners, top departmental management, corporate organization, corporate trade affiliations, any parent/subsidiary affiliations with other firms, etc.

Whole Kids Outreach is a faith-based, nonprofit organization with a governing board of directors who hires and oversees the Executive Director.

7. Provide a list summarizing any pending or final legal proceedings involving you or your company that took place in any court of law, administrative tribunal or alternative dispute resolution process that was filed, settled or gone to final judgment within the last three (3) years. The summary need not disclose confidential information of a disputed allegation of fact or law, but must contain the allegations made and/or contested or findings of the court of law, tribunal or dispute resolution process. Failure to provide a full and accurate summary of legal proceedings may result in rejection of the proposal or termination of any subsequent contract.

Butler County, Missouri—Tyler Hollis vs. Health Management Associates, Inc., et al
Case voluntary dismiss, with prejudice January 2016.



ORGANIZATIONAL CHART FOR ATA CONTRACT

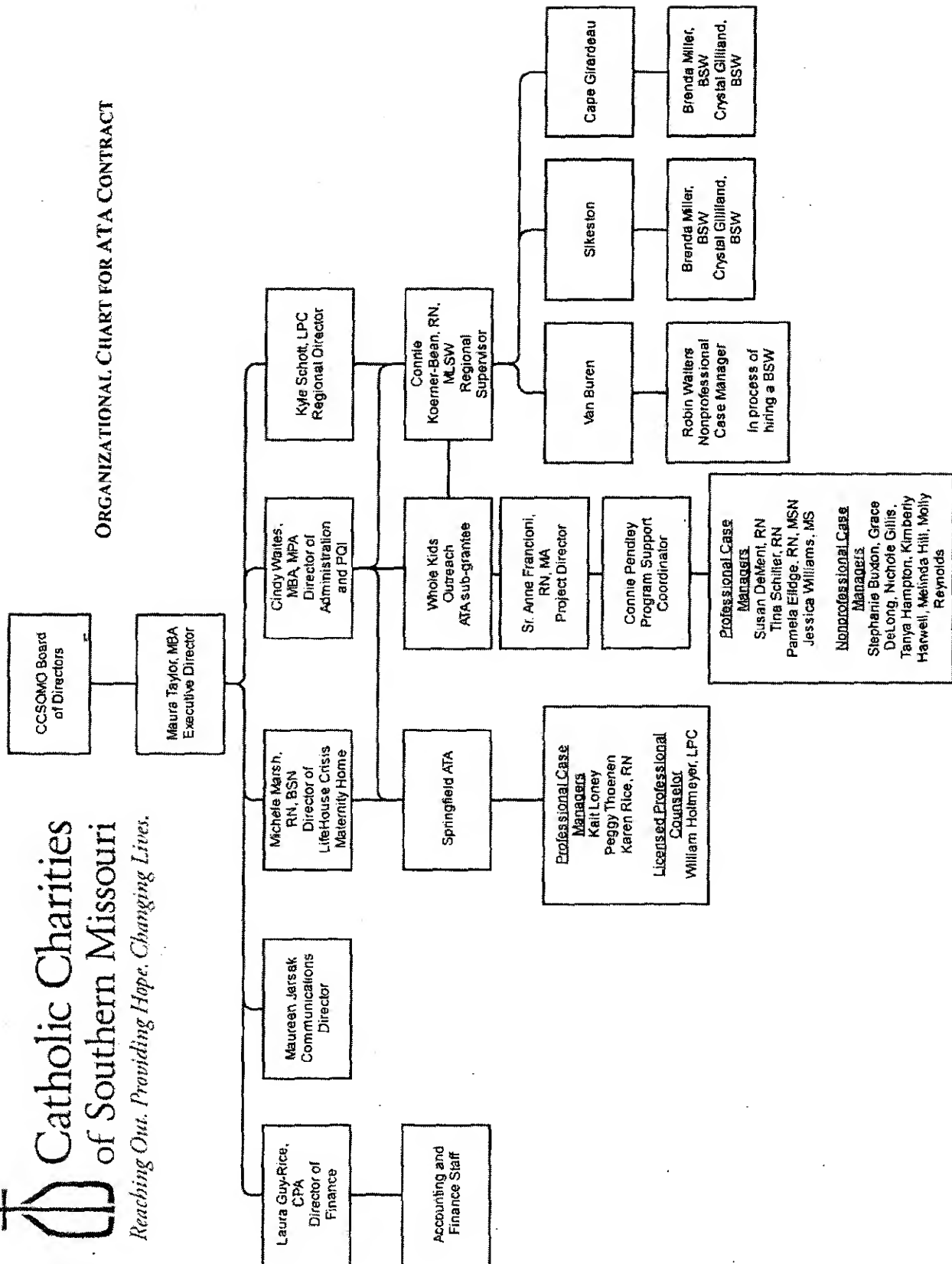


EXHIBIT CCERTIFICATION REGARDING EXEMPTION FROM INCOME TAXATION

The vendor certifies, by submission of the proposal and by signing below, that the vendor is "exempt from income taxation pursuant to the United States Internal Revenue Code".

Maura Taylor, Executive Director-Catholic Charities of Southern Missouri

Name and Title of Authorized Representative

Signature

3/25/16

Date

RFPS30034901600477

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EXHIBIT CCERTIFICATION REGARDING EXEMPTION FROM INCOME TAXATION

The vendor certifies, by submission of the proposal and by signing below, that the vendor is "exempt from income taxation pursuant to the United States Internal Revenue Code".

Sr. Anne Francioni, Executive Director
Name and Title of Authorized Representative


Signature

March 25, 2016
Date

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: SEP 15 2009

CATHOLIC CHARITIES OF SOUTHERN
MISSOURI INC
601 S JEFFERSON AVE
SPRINGFIELD, MO 65804-1143

Employer Identification Number:
60-0455890
EIN:
17953213326019
Contact Person:
JOHN J KOSTER ID# 31364
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
June 30
Public Charity Status:
170(b)(1)(A)(vi)
Form 990 Required:
Yes
Effective Date of Exemption:
July 24, 2009
Contribution Deductibility:
Yes
Addendum Applies:
No

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code, and you are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. We determined that you are a public charity under the Code section(s) listed in the heading of this letter.

Please see enclosed Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, for some helpful information about your responsibilities as an exempt organization.

Letter 947 (LX/CH)

CATHOLIC CHARITIES OF SOUTHERN

Sincerely,



Robert Choi
Director, Exempt Organizations
Rulings and Agreements

Enclosures: Publication #221-PC

Letter 947 (DO/CB)

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: **APR 07 2004**

WHOLE KIDS OUTREACH INC
RT 2 BOX 301X
ELLINGTON, MO 63638

Employer Identification Number:
43-1839370

DLN:

17053073808074

Contact Person:

STEPHEN D SEOK

ID# 31125

Contact Telephone Number:

(877) 829-5500

Public Charity Status:

170(b)(1)(A)(vi)

Dear Applicant:

Our letter dated July 1999, stated you would be exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code, and you would be treated as a public charity during an advance ruling period.

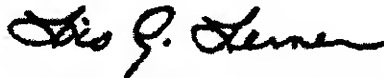
Based on our records and on the information you submitted, we are pleased to confirm that you are exempt under section 501(c)(3) of the Code, and you are classified as a public charity under the Code section listed in the heading of this letter.

Publication 557, Tax-Exempt Status for Your Organization, provides detailed information about your rights and responsibilities as an exempt organization. You may request a copy by calling the toll-free number for forms, (800) 829-3676. Information is also available on our Internet Web Site at www.irs.gov.

If you have general questions about exempt organizations, please call our toll-free number shown in the heading between 8:00 a.m. - 6:30 p.m. Eastern time.

Please keep this letter in your permanent records.

Sincerely yours,



Lois G. Lerner
Director, Exempt Organizations
Rulings and Agreements

Letter 1050 (DO/CG)

AUDIT INFORMATION

Catholic Charities of Southern Missouri, Inc.

Independent Auditor's Reports and Financial Statements

June 30, 2015 and 2014



Catholic Charities of Southern Missouri, Inc.

June 30, 2015 and 2014

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Independent Auditor's Report

Board of Directors
Catholic Charities of Southern Missouri, Inc.
Springfield, Missouri

We have audited the accompanying financial statements of Catholic Charities of Southern Missouri, Inc. which comprise the statements of financial position as of June 30, 2015 and 2014, and the related statements of activities and cash flows for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Our 2015 audit was also conducted in accordance with the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Catholic Charities of Southern Missouri, Inc. as of June 30, 2015 and 2014, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Supplementary Information

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The accompanying schedule of expenditures of federal award required by OMB Circular A-133, *Audits of States, Local Governments, and Non-Profit Organizations*, as listed in the table of contents, is presented for purposes of additional analysis and is not a required part of the basic financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

Other Reporting Required by Government Auditing Standards

In accordance with *Government Auditing Standards*, we have also issued our report dated November 12, 2015, on our consideration of the Organization's internal control over financial reporting and our tests of its compliance with certain provisions of laws, regulations, contracts and grant agreements and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the internal control over financial reporting on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering Catholic Charities of Southern Missouri, Inc.'s internal control over financial reporting and compliance.

BKD, LLP

Springfield, Missouri
November 12, 2015

Catholic Charities of Southern Missouri, Inc.

Statements of Financial Position

June 30, 2015 and 2014

	<u>2015</u>	<u>2014</u>
Assets		
Cash and cash equivalents	\$ 288,547	\$ 853,556
Investments	544,360	528,409
Trust funds invested with Diocese	635,532	284,663
Inventory	15,629	14,168
Real estate held for sale	85,500	-
Prepaid expenses and other assets	52,672	6,921
Other receivables	18,233	6,869
Grants receivable	482,676	237,857
Land and buildings	124,345	117,095
Equipment	328,180	200,102
Leasehold improvements	347,347	347,347
Construction in progress	13,450	-
Accumulated depreciation	<u>(349,249)</u>	<u>(105,424)</u>
Total assets	<u>\$ 2,587,222</u>	<u>\$ 2,491,563</u>
Liabilities		
Accounts payable and accrued expenses	\$ 257,648	\$ 77,574
Deferred revenue	<u>400,601</u>	<u>19,228</u>
Total liabilities	<u>658,249</u>	<u>96,802</u>
Net Assets		
Unrestricted	1,654,104	1,207,680
Temporarily restricted	<u>274,869</u>	<u>1,187,081</u>
Total net assets	<u>1,928,973</u>	<u>2,394,761</u>
Total liabilities and net assets	<u>\$ 2,587,222</u>	<u>\$ 2,491,563</u>

Catholic Charities of Southern Missouri, Inc.

Statements of Activities Years Ended June 30, 2015 and 2014

		2015 Temporarily Restricted	Total
	Unrestricted		
Revenues, Gains and Other Support			
Contributions, gifts and donations	\$ 397,796	\$ 864,538	\$ 1,262,334
Contributions - disaster	-	-	-
Contributions - grants	5,599	2,444,049	2,449,648
Contribution - acquisition of LifeHouse Crisis Maternity Home	-	-	-
Good Finds sales revenue	66,825	-	66,825
Other income	21,332	-	21,332
Investment income	8,642	-	8,642
Net assets released from restrictions Satisfaction of purpose and time restrictions	4,220,799	(4,220,799)	-
Total revenues, gains and other support	4,720,993	(912,212)	3,808,781
Expenses and Losses			
Management and general	200,601	-	200,601
Program services			
Disaster relief and social service programs	4,064,318	-	4,064,318
Fundraising	9,650	-	9,650
Total expenses and losses	4,274,569	-	4,274,569
Change in Net Assets	446,424	(912,212)	(465,788)
Net Assets, Beginning of Year	1,207,680	1,187,081	2,394,761
Net Assets, End of Year	\$ 1,654,104	\$ 274,869	\$ 1,928,973

See Notes to Financial Statements

2014		
Unrestricted	Temporarily Restricted	Total
\$ 368,339	\$ -	\$ 368,339
-	912,905	912,905
-	1,940,036	1,940,036
-	156,970	156,970
-	-	-
2,669	-	2,669
9,202	-	9,202
<u>3,196,473</u>	<u>(3,196,473)</u>	<u>-</u>
<u>3,576,683</u>	<u>(186,562)</u>	<u>3,390,121</u>
239,792	-	239,792
2,630,517	-	2,630,517
<u>6,019</u>	<u>-</u>	<u>6,019</u>
<u>2,876,328</u>	<u>-</u>	<u>2,876,328</u>
700,355	(186,562)	513,793
<u>507,325</u>	<u>1,373,643</u>	<u>1,880,968</u>
<u>\$ 1,207,680</u>	<u>\$ 1,187,081</u>	<u>\$ 2,394,761</u>

Catholic Charities of Southern Missouri, Inc.

Statements of Cash Flows Years Ended June 30, 2015 and 2014

	<u>2015</u>	<u>2014</u>
Operating Activities		
Change in net assets	\$ (465,788)	\$ 513,793
Items not requiring (providing) cash		
Depreciation	243,826	93,365
Acquisition of net assets of LifeHouse		
Crisis Maternity Home	-	(156,970)
Noncash gifts	(85,500)	-
Changes in		
Pledges and other receivables	(11,364)	34,403
Other assets	(45,751)	3,868
Grants receivable	(244,819)	(81,440)
Accounts payable and accrued expenses	167,521	5,323
Deferred revenue	381,373	19,228
Inventory	(1,461)	(14,168)
Net cash provided by (used in) operating activities	<u>(61,963)</u>	<u>417,402</u>
Investing Activities		
Cash received upon acquisition of LifeHouse		
Crisis Maternity Home	-	156,970
Purchase of property and equipment	(136,226)	(566,603)
Purchase of investments	(366,820)	(15,945)
Sale of investments	-	530,000
Net cash provided by (used in) investing activities	<u>(503,046)</u>	<u>104,422</u>
Increase (Decrease) in Cash and Cash Equivalents	<u>(565,009)</u>	<u>521,824</u>
Cash and Cash Equivalents, Beginning of Year	<u>853,556</u>	<u>331,732</u>
Cash and Cash Equivalents, End of Year	<u><u>\$ 288,547</u></u>	<u><u>\$ 853,556</u></u>

Catholic Charities of Southern Missouri, Inc.

Notes to Financial Statements

June 30, 2015 and 2014

Note 1: Nature of Operations and Summary of Significant Accounting Policies

Nature of Operations

Catholic Charities of Southern Missouri, Inc. (the "Organization") was incorporated in July 2009 and is an affiliated entity of Roman Catholic Diocese of Springfield-Cape Girardeau (the "Diocese"). The Organization is a not-for-profit organization whose mission and principal activities are to provide services including case management, counseling, disaster response, housing, pregnancy services and senior services for Southern Missouri.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues, expenses, gains, losses and other changes in net assets during the reporting period. Actual results could differ from those estimates.

Cash and Cash Equivalents

The Organization considers all liquid investments with original maturities of three months or less to be cash equivalents. At June 30, 2015 and 2014, cash equivalents consisted primarily of money market accounts with brokers.

Investments and Investment Return

Investments in equity securities having a readily determinable fair value and in all debt securities are carried at fair value. All other investments are carried at the lower of cost (or fair value at time of donation, if acquired by contribution) or fair value. Investment return includes dividend, interest and other investment income; realized and unrealized gains and losses on investments carried at fair value; and realized gains and losses on other investments. Trust funds invested with the Diocese are pooled investment funds and are accounted for on the cost method.

Property and Equipment

Equipment, land and buildings are stated at cost or, if acquired by gift, the estimated fair value at the date of the gift. Equipment and buildings are depreciated over the estimated useful life of each asset. Annual depreciation is computed using the straight-line method. Leasehold improvements are depreciated over the shorter of the lease term or their respective useful lives.

Catholic Charities of Southern Missouri, Inc.

Notes to Financial Statements

June 30, 2015 and 2014

Temporarily Restricted Net Assets

Temporarily restricted net assets are those whose use by the Organization has been limited by donors to a specific time period or purpose. At June 30, 2015 and 2014, temporarily restricted net assets consisted of donor specified funds or restricted due to grant stipulations.

Contributions

Gifts of cash and other assets received without donor stipulations are reported as unrestricted revenue and net assets. Gifts received with a donor stipulation that limits their use are reported as temporarily or permanently restricted revenue and net assets. When a donor stipulated time restriction ends or purpose restriction is accomplished, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as net assets released from restrictions. Gifts that are originally restricted by the donor and for which the restriction is met in the same time period are recorded as temporarily restricted and then released from restriction.

Gifts of land, buildings, equipment and other long-lived assets are reported as unrestricted revenue and net assets unless explicit donor stipulations specify how such assets must be used, in which case the gifts are reported as temporarily or permanently restricted revenue and net assets. Absent explicit donor stipulations for the time long-lived assets must be held, expirations of restrictions resulting in reclassification of temporarily restricted net assets as unrestricted net assets are reported when the long-lived assets are placed in service.

Unconditional gifts expected to be collected within one year are reported at their net realizable value. Unconditional gifts expected to be collected in future years are initially reported at fair value determined using the discounted present value of estimated future cash flows technique. The resulting discount is amortized using the level-yield method and is reported as contribution revenue.

In-Kind Contributions

In addition to receiving cash contributions, the Organization receives in-kind contributions of equipment and supplies, household items and quilts for disaster relief from various donors. It is the policy of the Organization to record the estimated fair value of certain in-kind donations as an expense or asset in its financial statements, and similarly increase contribution revenue by a like amount. For the years ended June 30, 2015 and 2014, \$234,995 and \$109,457 was received in in-kind contributions, respectively.

Functional Allocation of Expenses

The costs of supporting the various programs and other activities have been summarized on a functional basis in the statement of activities. Certain costs have been allocated among the program and support services categories based on various methods.

Catholic Charities of Southern Missouri, Inc.

Notes to Financial Statements

June 30, 2015 and 2014

Grants

Support funded by grants is recognized as the Organization performs the contracted services or incurs outlays eligible for reimbursement under the grant agreements. Grant activities and outlays are subject to audit and acceptance by the granting agency and, as a result of such audit, adjustments could be required. Revenue from grants is deferred and recognized during the period the related expense is incurred. Grants receivable are stated in the amount of related expense incurred for the grant project that has not yet been reimbursed.

Income Taxes

The Organization is exempt from income taxes under Section 501 of the Internal Revenue Code and a similar provision of state law. However, the Organization is subject to federal income tax on any unrelated business taxable income.

The Organization files tax returns in the U.S. federal jurisdiction. With a few exceptions, the Organization is no longer subject to U.S. federal examinations by tax authorities for years before 2012.

Note 2: Investments

Investments consist of a \$240,000, 5-year certificate of deposit with a May 18, 2017, maturity date, a \$250,000, 2-year certificate of deposit with an August 1, 2016, maturity date, funds invested at Community Foundation of the Ozarks and pooled investment funds with the Diocese.

Investments at June 30 consisted of the following:

	2015	2014
Certificate of deposit - 2-year term	\$ 254,934	\$ 253,298
Certificate of deposit - 5-year term	244,893	243,122
Community Foundation of the Ozarks	44,533	31,989
Pooled investment funds held with Diocese	635,532	284,663
	<u>\$ 1,179,892</u>	<u>\$ 813,072</u>

Investment return at June 30, 2015 and 2014, was \$8,642 and \$9,202, respectively, and consisted of interest income.

Catholic Charities of Southern Missouri, Inc.

Notes to Financial Statements

June 30, 2015 and 2014

Note 3: Related Party Transactions

The Organization has a management agreement with the Diocese for administrative services. Management fees of \$8,400 were paid to the Diocese for both years ended June 30, 2015 and 2014.

The Organization receives expense allocations for specific transactions paid by the Diocese. At June 30, 2015 and 2014, the Organization owed \$2,468 and \$933, respectively, to the Diocese, which is included in accounts payable.

The Organization entered into a long-term lease with the Diocese in December 2012 for a period of five years, with a renewal option, with monthly payments of \$4,167. For the years ended June 30, 2015 and 2014, the Organization made lease payments of \$50,000 to the Diocese.

Note 4: Retirement and Benefit Plans

The Organization has a noncontributory retirement plan covering all full-time lay personnel. The expense for the plan was \$104,043 and \$76,852 for the years ended June 30, 2015 and 2014, respectively. The retirement plan is part of a multiemployer plan, administered by the Christian Brothers Retirement Allowance Committee. The unfunded portion, if any, of vested employee benefits is not determinable at the Organization level. The Organization makes annual plan contributions equal to the retirement expense accrued.

Note 5: Operating Leases

Noncancellable operating leases for branch offices expire in various years through 2017. These leases generally contain renewal options for periods ranging from 1 to 5 years and require the Organization to pay all executory costs (property taxes, maintenance and insurance). Total operating lease expense for the years ended June 30, 2015 and 2014, was \$153,939 and \$109,458, respectively, of which \$50,100 and \$47,670, respectively, was paid to the Diocese for the long-term lease agreement.

Future minimum lease payments at June 30, 2015, were:

2016	\$ 89,100
2017	20,833
	<hr/>
	\$ 109,933

Catholic Charities of Southern Missouri, Inc.

Notes to Financial Statements

June 30, 2015 and 2014

Note 6: Acquisition

On September 19, 2013, the Organization acquired the net assets of Lifehouse Crisis Maternity Home, a not-for-profit organization that provides services and aid to pregnant women in crisis situations in the Springfield, Missouri, area. No consideration was or will be transferred for the acquisition. In connection with this acquisition, the Organization obtained \$156,970 of cash at the acquisition date. No liabilities were assumed. The acquired assets were recorded at their estimable fair value. The acquisition resulted in an inherent contribution received of \$156,970, which represents the net recognized amount of the identifiable assets acquired over the liabilities assumed. This amount has been included in contribution revenue in the statement of activities. The operations of the acquired are expected to be supported by future contributions and grant revenue.

Note 7: Significant Estimates and Concentrations

Accounting principles generally accepted in the United States of America require disclosure of certain significant estimates and current vulnerabilities due to certain concentrations. Those matters include the following:

Revenues

The Organization received approximately 11% and 0% of its revenues from the Veterans Administration with the Supportive Services for Veterans and Families grant (SSVF) for the years ended June 30, 2015 and 2014, respectively. At June 30, 2015 and 2014, approximately 19% and 0% of grants receivable were recorded in connection with this grant.

The Organization received approximately 2% and 20% of its revenues from the Catholic Charities USA (CCUSA) for the years ended June 30, 2015 and 2014, respectively.

The Organization received approximately 28% and 14% of its revenues from Missouri SB40 (SB40) for the years ended June 30, 2015 and 2014, respectively. At June 30, 2015 and 2014, approximately 58% and 0% of grants receivable were recorded in connection with this grant.

The Organization had outstanding receivables from the Emergency Services Grant (ESG) of approximately 11% and 48% of its grants receivable outstanding at June 30, 2015 and 2014, respectively.

Catholic Charities of Southern Missouri, Inc.

Notes to Financial Statements

June 30, 2015 and 2014

Note 8: Subsequent Events

Subsequent to year end, on August 12, 2015, the condominium located in Branson, Missouri, that was donated to the organization during the fiscal year and was recorded as real estate held for sale at year end was sold to a third party. The sale price of \$85,500 approximated the value recorded to contributions and recorded as real estate held for sale as of June 30, 2015.

Subsequent events have been evaluated through the date of the Independent Auditor's Report, which is the date the financial statements were available to be issued.

Supplementary Information

Catholic Charities of Southern Missouri, Inc.
Schedule of Expenditures of Federal Awards
Year Ended June 30, 2015

Cluster/Program	Federal Agency/ Pass-Through Entity	CFDA Number	Grant or Identifying Number	Amount Expended
VA Supportive Services for Veteran Families Program	Department of Veterans Affairs	64.033	15-MO-330	\$ 413,284
Emergency Solutions Grant Program	Department of Housing and Urban Development/ Missouri Housing Development Commission/Missouri Department of Mental Health/Cape Girardeau County Board for the Developmentally Disabled	14.231	15-716-E, 15-716-S, 15-717-E, ER19915TCM07	273,903
Emergency Food and Shelter National Board Program	Department of Homeland Security/United Way	97.024	N/A	12,346
Juvenile Mentoring Program	Department of Justice/Catholic Charities USA	16.726	N/A	27,687
Housing Counseling Assistance Program	Department of Housing and Urban Development/Catholic Charities USA	14.169	HC140011017	25,000
Hurricane Sandy Community Development Block Grant Disaster Recovery Grants (CDBG-DR)	Department of Housing and Urban Development/City of Joplin, Missouri	14.269	DR-2012-03-C	3,619
Total expenditures of federal awards				<u>\$ 755,839</u>

Notes to Schedule

1. This schedule includes the federal awards activity of Catholic Charities of Southern Missouri, Inc. (the "Organization") and is presented on the accrual basis of accounting. The information in this schedule is presented in accordance with the requirements of OMB Circular A-133, *Audits of States, Local Governments, and Non-Profit Organizations*. Therefore, some amounts presented in this schedule may differ from amounts presented in, or used in the preparation of, the basic financial statements.
2. The Organization provided no federal awards to subrecipients.

**Independent Auditor's Report on Internal Control Over
Financial Reporting and on Compliance and Other Matters Based on an
Audit of the Financial Statements Performed in Accordance with
Government Auditing Standards**

Board of Directors
Catholic Charities of Southern Missouri, Inc.
Springfield, Missouri

We have audited, in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States, the financial statements of Catholic Charities of Southern Missouri, Inc., which comprise the statement of financial position as of June 30, 2015, and the related statements of activities and cash flows for the year then ended, and the related notes to the financial statements, and have issued our report thereon dated November 12, 2015.

Internal Control Over Financial Reporting

Management of the Organization is responsible for establishing and maintaining effective internal control over financial reporting (internal control). In planning and performing our audit, we considered the Organization's internal control to determine the audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the Organization's internal control. Accordingly, we do not express an opinion on the effectiveness of the Organization's internal control.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent or detect and correct misstatements on a timely basis. A material weakness is a deficiency, or a combination of deficiencies, in internal control such that there is a reasonable possibility that a material misstatement of the Organization's financial statements will not be prevented or detected and corrected on a timely basis. A significant deficiency is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

Board of Directors
Catholic Charities of Southern Missouri, Inc.

Compliance and Other Matters

As part of obtaining reasonable assurance about whether the Organization's financial statements are free of material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts and grant agreements, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit and, accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

We also noted certain matters that we reported to the Organization's management in a separate letter dated November 12, 2015.

Purpose of this Report

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the entity's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the Organization's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

BKD, LLP

Springfield, Missouri
November 12, 2015

**Report on Compliance for Each Major Federal Program
and Report on Internal Control Over Compliance**

Independent Auditor's Report

Board of Directors
Catholic Charities of Southern Missouri, Inc.
Springfield, Missouri

Report on Compliance for Major Federal Program

We have audited Catholic Charities of Southern Missouri, Inc.'s compliance with the types of compliance requirements described in the *OMB Compliance Supplement* that could have a direct and material effect on Catholic Charities of Southern Missouri, Inc.'s major federal program for the year ended June 30, 2015. The Organization's major federal program is identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs.

Management's Responsibility

Management is responsible for compliance with the requirements of laws, regulations, contracts and grants applicable to its federal programs.

Auditor's Responsibility

Our responsibility is to express an opinion on compliance for Catholic Charities of Southern Missouri, Inc.'s major federal program based on our audit of the types of compliance requirements referred to above. We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States; and OMB Circular A-133, *Audits of States, Local Governments, and Non-Profit Organizations*. Those standards and OMB Circular A-133 require that we plan and perform the audit to obtain reasonable assurance about whether noncompliance with the types of compliance requirements referred to above that could have a direct and material effect on a major federal program occurred. An audit includes examining, on a test basis, evidence about the Organization's compliance with those requirements and performing such other procedures as we considered necessary in the circumstances.

We believe that our audit provides a reasonable basis for our opinion on compliance for the major federal program. However, our audit does not provide a legal determination of the Organization's compliance.

Board of Directors
Catholic Charities of Southern Missouri, Inc.

Opinion on the Major Federal Program

In our opinion, Catholic Charities of Southern Missouri, Inc. complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on its major federal program for the year ended June 30, 2015.

Report on Internal Control Over Compliance

Management of Catholic Charities of Southern Missouri, Inc. is responsible for establishing and maintaining effective internal control over compliance with the types of compliance requirements referred to above. In planning and performing our audit of compliance, we considered the Organization's internal control over compliance with the types of requirements that could have a direct and material effect on the major federal program to determine the auditing procedures that are appropriate in the circumstances for the purpose of expressing our opinion on compliance for the major federal program and to test and report on internal control over compliance in accordance with OMB Circular A-133, but not for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, we do not express an opinion on the effectiveness of the Organization's internal control over compliance.

A deficiency in internal control over compliance exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal program on a timely basis. A material weakness in internal control over compliance is a deficiency, or combination of deficiencies, in internal control over compliance such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis. A significant deficiency in internal control over compliance is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over compliance was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies. We did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of OMB Circular A-133. Accordingly, this report is not suitable for any other purpose.

BKD, LLP

Springfield, Missouri
February 16, 2016

Catholic Charities of Southern Missouri, Inc.
Schedule of Findings and Questioned Costs
Year Ended June 30, 2015

Summary of Auditor's Results

1. The opinion expressed in the independent auditor's report was:
- ☒ Unmodified ☐ Qualified ☐ Adverse ☐ Disclaimer
2. The independent auditor's report on internal control over financial reporting disclosed:
- Significant deficiency(ies)? ☐ Yes ☒ None reported
- Material weakness(es)? ☐ Yes ☒ No
3. Noncompliance considered material to the financial statements was disclosed by the audit? ☐ Yes ☒ No
4. The independent auditor's report on internal control over compliance for the major federal awards program disclosed:
- Significant deficiency(ies)? ☐ Yes ☒ None reported
- Material weakness(es)? ☐ Yes ☒ No
5. The opinion expressed in the independent auditor's report on compliance for major federal awards was:
- ☒ Unmodified ☐ Qualified ☐ Adverse ☐ Disclaimer
6. The audit disclosed findings required to be reported by OMB Circular A-133? ☐ Yes ☒ No

Catholic Charities of Southern Missouri, Inc.
Schedule of Findings and Questioned Costs
Year Ended June 30, 2015

7. The Organization's major program was:

<u>Cluster/Program</u>	<u>CFDA Number</u>
VA Supportive Services for Veteran Families Program	64.033

8. The threshold used to distinguish between Type A and Type B programs as those terms are defined in OMB Circular A-133 was \$300,000.

9. The Organization qualified as a low-risk auditee as that term is defined in OMB Circular A-133?

☐ Yes

☒ No

Catholic Charities of Southern Missouri, Inc.
Schedule of Findings and Questioned Costs
Year Ended June 30, 2015

Findings Required to be Reported by Government Auditing Standards

Reference Number	Finding	Questioned Costs
No matters are reportable.		

Catholic Charities of Southern Missouri, Inc.

Schedule of Findings and Questioned Costs

Year Ended June 30, 2015

Findings Required to be Reported by OMB Circular A-133

Reference Number	Finding	Questioned Costs
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No matters are reportable.

Catholic Charities of Southern Missouri, Inc.
Summary Schedule of Prior Audit Findings
Year Ended June 30, 2015

Reference Number	Summary of Finding	Status
No matters are reportable.		

EXHIBIT D**CURRENT/PRIOR EXPERIENCE - Vendor**

The vendor should copy and complete this form documenting the vendor and subcontractor's current/prior experience considered relevant to the services required herein. In addition, the vendor is advised that if the contact person listed for verification of services is unable to be reached during the evaluation, the listed experience may not be considered.

Vendor Name or Subcontractor Name: <u>Catholic Charities of Southern Missouri, Inc.</u> (if reference is for a Subcontractor):	
Reference Information (Current/Prior Services Performed For:)	
Name of Reference Company/Client:	Office of Administration
Address of Reference Company/Client:	Commissioner's Office State Capital Building, Room 125 Jefferson City, MO 65101
Reference Contact Person Name, Phone #, and E-mail Address:	Emily Kraft Special Assistant to the Commissioner Phone: (573) 751-8502
Title/Name of Service/Contract	Alternatives to Abortion Program Services
Dates of Service/Contract:	6/1/12-6/30/16
If service/contract has terminated, specify reason:	
Size of Service such as: ✓ Number of Individuals Being Served ✓ Total Annual Value/Volume	70 individual women enrolled in services during the grant period under CCSOMO. Sub grantee (WKO)
Size of Service/Contract (in terms of vendor's total amount of business)	
Description of Services Performed, such as: ✓ Population Served ✓ Type of Services Performed ✓ Geographic Area Served ✓ Vendor's specific duties and strategic objective	<ul style="list-style-type: none"> ✓ At risk pregnant women and their children up to one year after birth ✓ Case management services to include but not limited to the following: <ul style="list-style-type: none"> • Safe sleep for infants following the 2011 American Academy of Pediatrics Recommendations; • Breastfeeding; • Importance of taking folic acid in the prevention of neural tube defects; • Use of substances during pregnancy including alcohol, tobacco, and other drugs; • Importance of prenatal care; • Immunizations; • Shaken baby syndrome; • Car seat safety; and • Nutrition and healthy eating. ✓ Geographic area served 8 & 9 ✓ Goals and objective include: <ul style="list-style-type: none"> • Reduce abortions and improve pregnancy outcomes; • Improve child health and development; and • Improve families' economic self-sufficiency by: <ol style="list-style-type: none"> (1) helping clients develop a vision for the client's own future, (2) continuing the client's education, and (3) finding jobs.

Personnel Assigned to Service/Contract (include position title):	Kyle Schott LPC, Regional Director; Connie Koerner-Bean, LMSW; Crystal Gilliland, BSW; Robin Walter, case manager; Brenda Miller, BSW; Cindy Waites, Director of Administration and PQL.
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Vendor Name or Subcontractor Name: <u>Catholic Charities of Southern Missouri, Inc.</u> (if reference is for a Subcontractor):	
Reference Information (Current/Prior Services Performed For:)	
Name of Reference Company/Client:	US Department of Veteran Affairs
Address of Reference Company/Client:	Supportive Services for Veteran Families Program Office 4100 Chester Avenue, Ste. 201 Philadelphia, PA 19104
Reference Contact Person Name, Phone #, and E-mail Address:	John Kuhn National Director VA SSVF Program (SSVF)
Title/Name of Service/Contract	Supportive Services for Veteran Families (SSVF)-CFDA Number: 64.033
Dates of Service/Contract:	Original contract 10/1/14-9/30/15 was renewed for 10/1/15-9/30/16. CCSOMO submitted a renewal application in February for 2016-2017.
If service/contract has terminated, specify reason:	
Size of Service such as: ✓ Number of Individuals Being Served ✓ Total Annual Value/Volume	129 Veteran Households were served from 10/1/14-9/30/15. 80% were considered homeless.
Size of Service/Contract (in terms of vendor's total amount of business)	\$620,238 of \$4.9 million budget equals 12.66%.
Description of Services Performed, such as: ✓ Population Served ✓ Type of Services Performed ✓ Geographic Area Served ✓ Vendor's specific duties and strategic objective	Funding for case management and housing services which include direct assistance for veteran families who are homeless or at-risk of homelessness in the 36 southernmost counties in Missouri. Goals are to obtain and retain housing, achieve self-sufficiency, keep families together, access services/benefits and stable housing.
Personnel Assigned to Service/Contract (include position title):	Program Manager-Margaret Hart LMSW; five case managers providing services out of the Cape Girardeau, Sikeston, Poplar Bluff, Van Buren, Springfield and Joplin offices (Chris Malotte, Karen Auner, John Fuller, Skip Weber, Mallory Parr); Cindy Waites, Director of Administration and PQI; Matthew Gallion, Director of Quality Assurance; 0.5 FTE HUD certified Housing and Financial Counselor based out of Van Buren, Springfield and Joplin offices.

Vendor Name or Subcontractor Name: <u>Catholic Charities of Southern Missouri, Inc.</u> (if reference is for a Subcontractor):	
Reference Information (Current/Prior Services Performed For:)	
Name of Reference Company/Client:	Missouri Housing Development Commission
Address of Reference Company/Client:	Missouri Housing Development Commission 920 Main Street, Suite 1400 Kansas City, MO 64105-2017
Reference Contact Person Name, Phone #, and E-mail Address:	Julie Smith- Community Initiatives Coordinator 816.759.6632 Direct jsmith@mhdc.com
Title/Name of Service/Contract	Emergency Solutions Grant (ESG)
Dates of Service/Contract:	ESG-2013 (1/1/13-3/31/14) Carter/Shannon/Mississippi/Scott/Jasper/Newton; ESG-2014 (1/1/14-3/31/15) previous counties plus Cape Girardeau; ESG-2015 (1/1/15-3/31/16) previous counties plus Greene, Christian and Webster; ESG 2016 (1/1/16-3/31/17) all previous counties.
If service/contract has terminated, specify reason:	
Size of Service such as: ✓ Number of Individuals Being Served ✓ Total Annual Value/Volume	ESG-2013 \$222,915 provided case management services to 219 individuals. ESG-2014 \$242,889 provided services to 278 individuals. ESG-2015 \$313,300 provided services to ESG-2016 \$330,311 current contract.
Size of Service/Contract (in terms of vendor's total amount of business)	\$330,000/\$4.9 Million equals 6.7%.
Description of Services Performed, such as: ✓ Population Served ✓ Type of Services Performed ✓ Geographic Area Served ✓ Vendor's specific duties and strategic objective	CCSOMO provides housing stability case management services to families and individuals with household income under 30% AMI (Average Median Income) who are at imminent risk of homelessness (Homeless Prevention). Services are provided in 10 counties in southern Missouri: Cape Girardeau, Carter, Christian, Greene, Jasper, Mississippi, Newton, Scott, Shannon and Webster. CCSOMO provides family strengthening case management that assists families in achieving housing stability and move towards long-term self-sufficiency.
Personnel Assigned to Service/Contract (include position title):	Cindy Waites, Director of Administration & PQI; Laura Guy-Rice, CFO; Connie Koerner-Bean, East Supervisor (LMSW); Callie Lankford, Supervisor/Joplin (MSW); Margaret Hart (LMSW) Supervisor; 6 case managers operating out of Cape Girardeau, Sikeston, Van Buren, Springfield & Joplin off. (Andrea Minor, Laura Westley, Chris Malotte, Brenda Miller, Robin Walters, Crystal Gilliland)

Vendor Name or Subcontractor Name: Catholic Charities of Southern Missouri, Inc.
(if reference is for a Subcontractor):

Reference Information (Current/Prior Services Performed For:)

Name of Reference Company/Client:	Missouri Housing Development Commission
Address of Reference Company/Client:	Community Initiatives Coordinator Missouri Housing Development Commission 920 Main Street, Suite 1400 Kansas City, MO 64105-2017
Reference Contact Person Name, Phone #, and E-mail Address:	Joselyn Pfliegier, MSW Community Initiatives Coordinator 816.759.7228 Direct jpfliegier@mhdc.com
Title/Name of Service/Contract	Missouri Housing Trust Fund-Rental Assistance; Emergency Assistance Housing First
Dates of Service/Contract:	April 1, 2016-March 31, 2017; previous year April 1, 2015-March 31, 2016
If service/contract has terminated, specify reason:	
Size of Service such as: ✓ Number of Individuals Being Served ✓ Total Annual Value/Volume	2015- Served 26 households under 50% AMI with rental assistance. (\$32,500) 2016 newly awarded funding to serve low-income households with rental assistance \$25,000 and Emergency Assistance \$26,500. 2016 awarded \$25,000 Housing First funds to rapidly rehouse families.
Size of Service/Contract (in terms of vendor's total amount of business)	2016 contract is \$76,500 of \$4.9 Million budget or 1.6%.
Description of Services Performed, such as: ✓ Population Served ✓ Type of Services Performed ✓ Geographic Area Served ✓ Vendor's specific duties and strategic objective	Low-income families with household income below 50% AMI (Average Median Income) will be eligible for housing stability case management and rental or emergency assistance in 35 southern counties. Housing First funding and case management for homeless families will be available in 34 southern counties. CCSOMO case managers will assist homeless or families at-risk of homelessness in achieving housing stability and self-sufficiency by accessing resources including job training and education.
Personnel Assigned to Service/Contract (include position title):	Cindy Waites, Director of Administration & PQI; Laura Guy-Rice, CFO; Connie Koerner-Bean, East Supervisor (LMSW); Callie Lankford, Supervisor Joplin (MSW); Margaret Hart (LMSW) Supervisor/Springfield; 6 case managers in Cape Girardeau, Sikeston, Van Buren, Springfield and Joplin (Andrea Minor, Laura Westley, Chris Malotte, Brenda Miller, Robin Walters & Crystal Gilliland)

Vendor Name or Subcontractor Name: <u>Catholic Charities of Southern Missouri, Inc.</u> (if reference is for a Subcontractor):	
Reference Information (Current/Prior Services Performed For:)	
Name of Reference Company/Client:	Catholic Charities USA
Address of Reference Company/Client:	Catholic Charities USA 2050 Ballenger Ave., Suite 400 Alexandria, VA 22314-6847
Reference Contact Person Name, Phone #, and E-mail Address:	Kathleen Over Housing Counseling Grants Manager 818-521-8829 koverr@catholiccharitiesusa.org
Title/Name of Service/Contract	HUD Housing Counseling Grant
Dates of Service/Contract:	October 1, 2014 – March 31, 2016
If service/contract has terminated, specify reason:	
Size of Service such as: ✓ Number of Individuals Being Served ✓ Total Annual Value/Volume	144 households, 283 individuals provided housing and financial counseling. 741 hours of counseling was provided to low-income households.
Size of Service/Contract (in terms of vendor's total amount of business)	\$31,000 of \$4.9 million budget equals 0.6%.
Description of Services Performed, such as: ✓ Population Served ✓ Type of Services Performed ✓ Geographic Area Served ✓ Vendor's specific duties and strategic objective	3 Hispanic, 141 Non-Hispanic, 2 American Indian/Alaskan Native, 15 Black, 8 Multi Race, and 119 White. 2 Limited English Proficiency (LEP). Homeless housing assistance, rental topics, Pre-purchase/Home-buying, Home Maintenance & Financial Management for Homeowners, Mortgage Default, budgeting, one-on-one financial coaching, foreclosure prevention. CCSOMO housing counseling provided in 39 rural and impoverished counties. Assist the clients as they move towards self-sufficiency by : financial literacy, budgeting & credit improvement. Assist clients in finding safe, affordable housing.
Personnel Assigned to Service/Contract (include position title position title)	Delores Maples-Director of Housing and Financial Counseling; Laura Guy-Rice, CFO; Robin Walters & Laura Westley-Certified Housing and Financial Counselors; Cindy Waites, Director of Administration and PQL.

EXHIBIT D**CURRENT/PRIOR EXPERIENCE - Subcontractor**

The vendor should copy and complete this form documenting the vendor and subcontractor's current/prior experience considered relevant to the services required herein. In addition, the vendor is advised that if the contact person listed for verification of services is unable to be reached during the evaluation, the listed experience may not be considered.

Vendor Name or Subcontractor Name: Whole Kids Outreach (if reference is for a Subcontractor):	
Reference Information (Current/Prior Services Performed For:)	
Name of Reference Company/Client:	MO Department of Social Services, Children's Division.
Address of Reference Company/Client:	Department of Social Services, Children's Division Early Childhood & Prevention Services Section Post Office Box 88 Jefferson City MO 65102
Reference Contact Person Name, Phone #, and E-mail Address:	Nancy L. Reid, M.Ed., LPC Children's Division 573-522-2316, fax 573-526-9586
Title/Name of Service/Contract	CONTRACT NO.: C313011015 Home Visitation Program Services
Dates of Service/Contract:	July 1, 2015 – June 30, 2016
If service/contract has terminated, specify reason:	n/a
Size of Service such as: ✓ Number of Individuals Being Served ✓ Total Annual Value/Volume	100 families/year \$125,000/year
Size of Service/Contract (in terms of vendor's total amount of business)	Over the course of the contract period, 100 families receive home visiting services at least once/month.
Description of Services Performed, such as: ✓ Population Served ✓ Type of Services Performed ✓ Geographic Area Served ✓ Vendor's specific duties and strategic objective	WKO serves pregnant women and teens that live in the impoverished region of Butler, Carter, Reynolds, Iron, Shannon and Wayne counties of the MO Ozarks. Whole Kids Outreach provides services to pregnant women with risk factors associated with poor birth outcomes and children and families with risk factors associated with child maltreatment and poor developmental outcomes (e.g., women and children living in domestic violence, single parents, and teen parents). The majority of WKO's clients are low-income; teen mothers make up 17% of WKO's clients. Educational attainment is low in these counties, and many WKO clients/mothers do not have high school diplomas. About one and half times as many (33.4%) children under age 18 live in poverty in the WKO service region compared to the overall state of Missouri (21.8%). Adult unemployment in the WKO counties is two to three times higher than that for the state. WKO provides home visits utilizing the Healthy Families America model of service delivery to reduce factors that contribute to child maltreatment and infant mortality rates.
Personnel Assigned to Service/Contract (include position title):	Sr. Anne Francioni, RN, MA—Project Director, Connie Pendley—Program Support Coordinator, Outreach Specialists (home visitors): Stephanie Buxton, Grace DeLong, Nichole Gillis, Tanya Hampton, Kimberly Harwell, Melinda Hill, Molly Reynolds.

Vendor Name or Subcontractor Name: Whole Kids Outreach (if reference is for a Subcontractor):	
Reference Information (Current/Prior Services Performed For:)	
Name of Reference Company/Client:	MO Highlands Healthcare
Address of Reference Company/Client:	110 South 2 nd St., Ellington, MO 63638
Reference Contact Person Name, Phone #, and E-mail Address:	Bethany Reynolds breynolds@mohigh.org 573-663-2313
Title/Name of Service/Contract	HRSA Delta Project
Dates of Service/Contract:	July 1, 2015 – June 30, 2016
If service/contract has terminated, specify reason:	n/a
Size of Service such as: ✓ Number of Individuals Being Served ✓ Total Annual Value/Volume	Approximately 20 families/year supported by this grant.
Size of Service/Contract (in terms of vendor's total amount of business)	\$20,000
Description of Services Performed, such as: ✓ Population Served ✓ Type of Services Performed ✓ Geographic Area Served ✓ Vendor's specific duties and strategic objective	<p>WKO serves pregnant women and teens that live in the impoverished region of Butler, Carter, Reynolds, Iron, Shannon and Wayne counties of the MO Ozarks.</p> <p>Whole Kids Outreach provides services to pregnant women with risk factors associated with poor birth outcomes and children and families with risk factors associated with child maltreatment and poor developmental outcomes (e.g., women and children living in domestic violence, single parents, and teen parents). The majority of WKO's clients are low-income; teen mothers make up 17% of WKO's clients. Educational attainment is low in these counties, and many WKO clients/mothers do not have high school diplomas. About one and half times as many (33.4%) children under age 18 live in poverty in the WKO service region compared to the overall state of Missouri (21.8%). Adult unemployment in the WKO counties is two to three times higher than that for the state.</p> <p>WKO provides home visits utilizing the Healthy Families America model of service delivery to reduce factors that contribute to child maltreatment and infant mortality rates.</p>
Personnel Assigned to Service/Contract (include position title):	<p>Sr. Anne Francioni, RN, MA—Project Director</p> <p>Connie Pendley—Program Support Coordinator</p> <p>Outreach Specialists (home visitors): Stephanie Buxton, Grace DeLong, Nichole Gillis, Tanya Hampton, Kimberly Harwell, Melinda Hill, Molly Reynolds.</p>

Vendor Name or Subcontractor Name: Whole Kids Outreach (if reference is for a Subcontractor):	
Reference Information (Current/Prior Services Performed For:)	
Name of Reference Company/Client:	Missouri Foundation for Health
Address of Reference Company/Client:	415 South 18 th Street, Ste. 400 St. Louis, MO 63103
Reference Contact Person Name, Phone #, and E-mail Address:	Jean Freeman-Crawford, MPH, MSW jcrawford@mffh.org 314-345-5545
Title/Name of Service/Contract	Special Projects 2014 Whole Kids Outreach Healthy Families America
Dates of Service/Contract:	August 1, 2014 – July 31, 2017
If service/contract has terminated, specify reason:	n/a
Size of Service such as: ✓ Number of Individuals Being Served ✓ Total Annual Value/Volume	Approximately 230 families/year supported by this grant.
Size of Service/Contract (in terms of vendor's total amount of business)	\$ 484,546 over three years.
Description of Services Performed, such as: ✓ Population Served ✓ Type of Services Performed ✓ Geographic Area Served ✓ Vendor's specific duties and strategic objective	<p>WKO serves pregnant women and teens that live in the impoverished region of Butler, Carter, Reynolds, Iron, Shannon and Wayne counties of the MO Ozarks.</p> <p>Whole Kids Outreach provides services to pregnant women with risk factors associated with poor birth outcomes and children and families with risk factors associated with child maltreatment and poor developmental outcomes (e.g., women and children living in domestic violence, single parents, and teen parents). The majority of WKO's clients are low-income; teen mothers make up 17% of WKO's clients. Educational attainment is low in these counties, and many WKO clients/mothers do not have high school diplomas. About one and half times as many (33.4%) children under age 18 live in poverty in the WKO service region compared to the overall state of Missouri (21.8%). Adult unemployment in the WKO counties is two to three times higher than that for the state.</p> <p>WKO provides home visits utilizing the Healthy Families America model of service delivery to reduce factors that contribute to child maltreatment and infant mortality rates.</p>
Personnel Assigned to Service/Contract (include position title):	<p>Sr. Anne Francioni, RN, MA—Project Director</p> <p>Connie Pendley—Program Support Coordinator</p> <p>Outreach Specialists (home visitors):</p> <p>Stephanie Buxton, Grace DeLong, Nichole Gillis, Tanya Hampton, Kimberly Harwell, Melinda Hill, Molly Reynolds.</p>

Vendor Name or Subcontractor Name: Whole Kids Outreach (if reference is for a Subcontractor):	
Reference Information (Current/Prior Services Performed For:)	
Name of Reference Company/Client:	Children's Trust Fund
Address of Reference Company/Client:	Harry S Truman Office Building, Room 860 301 West High Street; P.O. Box 1641 Jefferson City, MO 65102-1641
Reference Contact Person Name, Phone #, and E-mail Address:	Kirk Schreiber, Executive Director 573-751-5147, kirk.schreiber@oa.mo.gov
Title/Name of Service/Contract	General Prevention Grant Whole Kids Outreach Healthy Families America
Dates of Service/Contract:	July 1, 2015 – June 30, 2016
If service/contract has terminated, specify reason:	n/a
Size of Service such as: ✓ Number of Individuals Being Served ✓ Total Annual Value/Volume	Approximately 30 families/year supported by this grant.
Size of Service/Contract (in terms of vendor's total amount of business)	\$30,000
Description of Services Performed, such as: ✓ Population Served ✓ Type of Services Performed ✓ Geographic Area Served ✓ Vendor's specific duties and strategic objective	<p>WKO serves pregnant women and teens that live in the impoverished region of Butler, Carter, Reynolds, Iron, Shannon and Wayne counties of the MO Ozarks.</p> <p>Whole Kids Outreach provides services to pregnant women with risk factors associated with poor birth outcomes and children and families with risk factors associated with child maltreatment and poor developmental outcomes (e.g., women and children living in domestic violence, single parents, and teen parents). The majority of WKO's clients are low-income; teen mothers make up 17% of WKO's clients. Educational attainment is low in these counties, and many WKO clients/mothers do not have high school diplomas. About one and half times as many (33.4%) children under age 18 live in poverty in the WKO service region compared to the overall state of Missouri (21.8%). Adult unemployment in the WKO counties is two to three times higher than that for the state.</p> <p>WKO provides home visits utilizing the Healthy Families America model of service delivery to reduce factors that contribute to child maltreatment and infant mortality rates.</p>
Personnel Assigned to Service/Contract (include position title):	<p>Sr. Anne Francioni, RN, MA—Project Director</p> <p>Connie Pendley—Program Support Coordinator</p> <p>Outreach Specialists (home visitors):</p> <p>Stephanie Buxton, Grace DeLong, Nichole Gillis, Tanya Hampton, Kimberly Harwell, Melinda Hill, Molly Reynolds.</p>

Vendor Name or Subcontractor Name: Whole Kids Outreach (if reference is for a Subcontractor):	
Reference Information (Current/Prior Services Performed For:)	
Name of Reference Company/Client:	Dept. of Economic Development—Neighborhood Assistance Program State Tax Credit Program
Address of Reference Company/Client:	Missouri Department of Economic Development Division of Business and Community Services Finance Management Team 301 West High Street, Room 770 P.O. Box 118 Jefferson City, MO 65102
Reference Contact Person Name, Phone #, and E-mail Address:	Kim Baughman Community Development Programs kimberly.baughman@ded.mo.gov (573) 751-4539
Title/Name of Service/Contract	General Prevention Grant, Whole Kids Outreach Healthy Families America and Maternal-Child Visiting Nurse Programs
Dates of Service/Contract:	July 1, 2014 – June 30, 2017
If service/contract has terminated, specify reason:	n/a
Size of Service such as: ✓ Number of Individuals Being Served ✓ Total Annual Value/Volume	Approximately 200 families/year supported by this grant over three years.
Size of Service/Contract (in terms of vendor's total amount of business)	\$ 500,000
Description of Services Performed, such as: ✓ Population Served ✓ Type of Services Performed ✓ Geographic Area Served ✓ Vendor's specific duties and strategic objective	<p>WKO serves pregnant women and teens that live in the impoverished region of Butler, Carter, Reynolds, Iron, Shannon and Wayne counties of the MO Ozarks.</p> <p>Whole Kids Outreach provides services to pregnant women with risk factors associated with poor birth outcomes and children and families with risk factors associated with child maltreatment and poor developmental outcomes (e.g., women and children living in domestic violence, single parents, and teen parents). The majority of WKO's clients are low-income; teen mothers make up 17% of WKO's clients. Educational attainment is low in these counties, and many WKO clients/mothers do not have high school diplomas. About one and half times as many (33.4%) children under age 18 live in poverty in the WKO service region compared to the overall state of Missouri (21.8%). Adult unemployment in the WKO counties is two to three times higher than that for the state.</p> <p>WKO provides home visits utilizing the Healthy Families America and Nurses for Newborns models of service delivery to reduce factors that contribute to child maltreatment and infant mortality rates.</p>
Personnel Assigned to Service/Contract (include position title):	<p>Sr. Anne Francioni, RN, MA—Project Director, Connie Pendley—Program Support Coordinator, Outreach Specialists (home visitors): Stephanie Buxton, Grace DeLong, Nichole Gillis, Tanya Hampton, Kimberly Harwell, Melinda Hill, Molly Reynolds.</p> <p>Registered Nurses: Susan DeMent and Tina Shiller</p>

EXHIBIT E**EXPERTISE OF KEY PERSONNEL - Vendor**

(Copy and complete this table for each key person proposed. Titles of personnel should be consistent with titles referenced throughout the RFP.)

Title of Position: CCSOMO Executive Director	
Name of Person:	Maura Taylor
Educational Degree (s): include college or university, major, and dates	BS in Biology, Creighton University, 1980 MBA, Wichita State University, 1985
License(s)/Certification(s), #(s), expiration date(s), if applicable:	
Specialized Training Completed.	Additional graduate work in small business consulting.
# of years experience in area of service proposed to provide:	4.5 years at Catholic Charities of Southern Missouri as ED. 20 + years non-profit experience
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	4.5 years as Executive Director
Describe this person's responsibilities over the past 12 months.	Provides leadership, management and oversight of all CCSOMO operations in conjunction with the leadership team. ED implements the strategic plan developed by the Board of Directors. Provides fiscal and operational reports to the Board.
Previous employer(s), positions, and dates	2 years – Director of Special Projects-Community Foundation of the Ozarks, 2009-2011.
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	
✓ Family/marital counseling	
✓ Social work	
✓ Case management	Missouri State Trained Disaster Case Management Supervisor 2012.
✓ Program administration	Development and oversight of program policy and procedures and PQI. Work with quality assurance manager to measure outcomes and check data quality. HR responsibilities include hiring and performance reviews.

Title of Position: Director of Administration and PQI	
Name of Person:	Cindy Waites
Educational Degree (s): include college or university, major, and dates	BA-Vanderbilt University 1984, Economics and Molecular Biology MBA University of Michigan 1987, Finance/Corporate Strategy MHSA University of Michigan 1987, Hospital Administration
License(s)/Certification(s), #(s), expiration date(s), if applicable:	
Specialized Training Completed.	
# of years experience in area of service proposed to provide:	4 years at CCSOMO. 20 + years –non-profit agencies
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	4 years in Management and agency policy development at CCSOMO.
Describe this person's responsibilities over the past 12 months.	Human Resources, Agency policy and procedure, grants compliance and administration, performance improvement initiatives
Previous employer(s), positions, and dates	Cox-Health-Special Projects Coordinator 2011-2014.
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	
✓ Family/marital counseling	
✓ Social work	
✓ Case management	
✓ Program administration	Development and oversight of program policy and procedures and PQI. Work with quality assurance manager to measure outcomes and check data quality. HR responsibilities include hiring and performance reviews.

Title of Position: CCSOMO Regional Director/ATA Program Director	
Name of Person:	Kyle Schott
Educational Degree (s): include college or university, major, and dates	M.A. Counseling, Southeast Missouri State University Dec. 1997
License(s)/Certification(s), #(s), expiration date(s), if applicable:	Licensed Professional Counselor 1999142312, 12/22/1999
Specialized Training Completed.	EMDR, Certified Co-occurring Disorders
# of years experience in area of service proposed to provide:	27
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Employee since 2010
Describe this person's responsibilities over the past 12 months.	Program Director/Regional Director responsible for various program grants and contracts
Previous employer(s), positions, and dates	Community Counseling Center 2007-2010 Bootheel Counseling Services 1993-2007 Cottonwood Residential Treatment Center 1988-1992
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	Professional Counselor with children and families since 1997
✓ Family/marital counseling	Professional Counselor since 1997
✓ Social work	28 years' experience in the social services field
✓ Case management	Case Manager 1991-1997
✓ Program administration	2010-present

Title of Position: CCSOMO Eastside Regional Supervisor – ATA Region 8 & 9	
Name of Person:	Connie Koerner-Bean
Educational Degree (s): include college or university, major, and dates	Master of Social Work , University of Missouri, Columbia, MO, (2001) Bachelor of Science , emphasis in Social Work, Southeast Missouri State University, Cape Girardeau, MO, (1998) Associate Nursing Degree , Southeast Missouri State University, Cape Girardeau, MO, (1997)
License(s)/Certification(s), #(s), expiration date(s), if applicable:	Licensed Master Social Work , January 2015 State of Missouri, RN , #150154, expires 04/30/2017
Specialized Training Completed.	Associate Nursing Degree , Southeast Missouri State University, Cape Girardeau, MO, (1997)
# of years experience in area of service proposed to provide:	19
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Regional Supervisor for Catholic Charities of Southern Missouri, 08/2012 – to date
Describe this person's responsibilities over the past 12 months.	Regional Supervisor, complete initial and postpartum assessments; monitor services provided; chart audits.
Previous employer(s), positions, and dates	Mississippi County Health Department, <i>Public Health Department Administrator</i> (10/2011 – 04/2012) SynCare MO, LLC , (agency went out of business) Cape Girardeau, MO <i>Home and Community Based Services (HCBS)</i> Southeast Region Supervisor , (05/2011 – 09/2011) 05/2011 – 09/2011 Missouri Department of Health and Senior Services, Bureau of Special Health Care Needs , Cape Girardeau, MO 10/2005 - 05/2011 <i>Regional Coordinator, Southeast Missouri</i> (03/07 - 05/06/11) Hilltop Community Resources , Grand Junction, CO 06/2001 – 07/2005 <i>Home Health RN</i> (06/18/05 to 07/08/05) <i>Employee Health Nurse</i> , (06/18/01 to 07/08/05) Community Counseling Center , Cape Girardeau, MO 10/1995 – 06/2001 <i>Adult Alternative Critical Treatment Program RN</i> , (03/99 - 06/01) <i>Lou Masterman Center, Mental Health RCF</i> , Cape Girardeau, MO

Title of Position: CCSOMO Eastside Regional Supervisor – ATA Region 8 & 9	
Identify specific information about experience in:	
✓ Early childhood development	Raised three sons
✓ Family/marital counseling	30 hours completed towards a Master in Community Counseling , Southeast Missouri State University, Cape Girardeau, MO, (04/01) Community Counseling Center (CCC) , Cape Girardeau, MO Adult Alternative Critical Treatment Program RN , (03/99 - 06/01) Conducted group & one-on-one counseling sessions with out-patients.
✓ Social work	Mental health, teaching and assisting clients with independent living skills, long-term disaster needs, housing assessments, providing resources, service coordination.
✓ Case management	15 years of nursing and social work case management for a variety of clients with multiple issues, mental health, housing, health services.
✓ Program administration	Missouri Department of Health and Senior Services, Bureau of Special Health Care Needs, Cape Girardeau, MO 10/2005 - 05/2011 Interim Program Manager (03/08 – 07/08 & 10/08 – 04/09) <ul style="list-style-type: none"> • Management of two Medicaid based home care programs Regional Supervisor , (03/07 - 05/06/11) <ul style="list-style-type: none"> • Oversight of 4 nurses and 3 clerical positions Catholic Charities of Southern Missouri, 08/2012 – to date Regional Supervisor , Planning, implementing and auditing agency state and federal grant programs <ul style="list-style-type: none"> ○ Targeted Case Management for DMH Developmental Disabilities ○ Long-term Disaster Case Management ○ Emergency Solutions Grant – Homeless Prevention Services ○ Alternative to Abortion - at risk mothers and babies ○ Youth Mentoring

Title of Position: CCSOMO Family Strengthening Coordinator/ATA Professional Case Mgr. (Region 8 & 9)	
Name of Person:	Crystal Gilliland
Educational Degree (s): include college or university, major, and dates	Bachelor of Science: Social Work; Southeast Missouri State University; 12/2001
License(s)/Certification(s), #(s), expiration date(s), if applicable:	n/a
Specialized Training Completed.	
# of years experience in area of service proposed to provide:	12 years of total social work/case management experience; 2 years of maternal health case management experience
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Employee of Catholic Charities of Southern Missouri for 3 years
Describe this person's responsibilities over the past 12 months.	Intake, assessment, case management to include home visits, face to face, non-face to face visits, coordination of services, referrals, education of clients on maternal health and newborn care topics, assist clients in obtaining funding for rent, utilities, supplies as needed, data entry, maintenance of client files, documentation
Previous employer(s), positions, and dates	Community Counseling Center, Psychosocial Rehabilitation (PSR), 5/2005-9/2012 Family Counseling Center, Community Support Worker/Counselor in Training, 2/2002-7/2003
Identify specific information about experience in:	
✓ Early childhood development	
✓ Family/marital counseling	
✓ Social work	12 years of total experience
✓ Case management	12 years of experience
✓ Program administration	2 years of experience

Title of Position: CCSOMO Family Strengthening Coordinator/ATA Professional Case Mgr. (Region 8 & 9)	
Name of Person:	Brenda Miller
Educational Degree (s): include college or university, major, and dates	Bachelor of Social Work, Southeast Missouri State University, May, 1982
License(s)/Certification(s), #(s), expiration date(s), if applicable:	N/A
Specialized Training Completed.	Income Maintenance Case Manager and Children's Division Worker required training for specific positions held.
# of years experience in area of service proposed to provide:	34
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	2 years 11 months
Describe this person's responsibilities over the past 12 months.	Case manager for the Emergency Solutions/Homeless prevention grants in Cape Co., Scott/Miss Co. Case Manager for Missouri Housing Trust Fund/Rental Assistance Program
Previous employer(s), positions, and dates	Department of Social Services/Children's Division 1982-2013
Identify specific information about experience in:	
✓ Early childhood development	N/A
✓ Family/marital counseling	N/A
✓ Social work	34 years, Adoption Specialist-6 years. Permanency worker, 4 years. Eligibility Specialist 24 years
✓ Case management	34 years/ all positions required case management
✓ Program administration	N/A

Title of Position: CCSOMO Family Strengthening Coordinator/ATA Nonprofessional Case Mgr. (Region 8 & 9)	
Name of Person:	Robin Walters
Educational Degree (s): include college or university, major, and dates	Completion of Business Degree May 2016.
License(s)/Certification(s), #(s), expiration date(s), if applicable:	
Specialized Training Completed.	Disaster Case Management 2010, 2012 HUD certified Housing and Financial Counselor, 2014 HECM certification 2015
# of years experience in area of service proposed to provide:	3 years
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Employee 4 years 6 months
Describe this person's responsibilities over the past 12 months.	Case manager for various programs including "Healthy Moms, Healthy Babies", disaster response and long-term recovery, homeless prevention, housing and financial counseling.
Previous employer(s), positions, and dates	
Identify specific information about experience in:	
✓ Early childhood development	
✓ Family/marital counseling	
✓ Social work	
✓ Case management	4.5 years in CM for various funded programs
✓ Program administration	

Title of Position: CCSOMO Director of LifeHouse Crisis Maternity Home	
Name of Person:	Michele Marsh
Educational Degree (s): include college or university, major, and dates	Master's Degree in Pastoral Studies (MPS) - Loyola University, New Orleans, LA (08/2007) Bachelor of Science, Nursing (BSN) - Southwest Baptist University, Springfield, MO (2001, <i>cum laude</i>) Religious Education Diploma - Creighton University, Omaha, NE (1992) Registered Nurse Diploma (RN) - Barnes Hospital School of Nursing, St. Louis, MO (1979)
License(s)/Certification(s), #(s), expiration date(s), if applicable:	Registered Nurse License - Expires April 2017 Cardiopulmonary Resuscitation - Expires August 2017
Specialized Training Completed.	Certifications in High-Risk Neonatal Nursing, Neonatal and Pediatric Advance Life Support, Pediatric Palliative Care. Change Acceleration Process and various business, legal, and leadership training, as well as Medical Case Management. JustFaith Ministries Program (2007-2008)
# of years' experience in area of service proposed to provide:	28 years Maternal Child experience including case management, 7 years Community Health and Access, 1 and a half years as current director of LifeHouse Crisis Maternity Home and Program.
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	CCSOMO Employee since October 1, 2014.
Describe this person's responsibilities over the past 12 months.	Director of LifeHouse provides leadership, vision/direction, and oversight. Specifics include program development, leadership, and oversight. Hiring, staffing, payroll, financial oversight and management, grant writing, policy and procedure development, fundraising/event planning, community partnership participation and development, community outreach, facility management, COA preparation, Works closely with the staff, residents, volunteers, and donors.
Previous employer(s), positions, and dates	Mercy Health System: Director of Community Health and Access (2008-2014) Strategic Development and Planning, Increase Health and Wellness Access for the Underserved. Collaborations with Mercy Leadership and Community Leaders. Community Benefit Development and Oversight, Grant Oversight. Nurse Clinician/Educator (1999-2008) Leadership, Management, and Team Building Collaborative Experience. Development, Coordination, and Implementation of Education Programs for Staff, Physicians, Families, the Health System, and the Community VNA Specialty Services Nurse (1999) Assisted in the Development of the Pediatric Home Health Care Program. Assistant Nursing Director, Neonatal Transport Nurse (1989-1991). Newborn Nursery and Newborn Intensive Care Management and Transport Nurse for Hammon's Life Line and St. John's Ambulance Services, Outreach and Referral Education. NBN/NICU Nurse (1980-1988, 1992-1999). Cardiac Nurse (1980) High-Risk Ob/Gyn Nurse (1979) Barnes Hospital, St. Louis, MO

Title of Position: CCSOMO Director of LifeHouse Crisis Maternity Home	
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	Developmental needs for Neonatal Intensive Care Infants and pediatric children, early childhood collaborative involvement to include working with the schools and the Springfield's child abuse and neglect collaborative.
✓ Family/marital counseling	
✓ Social work	
✓ Case management	Case Management for children and adults
✓ Program administration	Director of Community Health and Access for Mercy Springfield Communities (6 hospitals). Community Benefit and various administrative duties. Assistant Nursing Director

Title of Position: LifeHouse Nurse Educator	
Name of Person:	Karen Rice RN
Educational Degree (s): include college or university, major, and dates	BS Nursing, Southern Illinois University at Edwardsville 1982
License(s)/Certification(s), #(s), expiration date(s), if applicable:	RN, Missouri #092051. Expires 4-2017
Specialized Training Completed.	Certified in Inpatient Obstetric Nursing 1993
# of years experience in area of service proposed to provide:	16 years in maternal-child nursing
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Employee 2 years
Describe this person's responsibilities over the past 12 months.	Health education of residents about their pregnancy, overall health and care of their newborns and other children.
Previous employer(s), positions, and dates	Missouri Eye Institute, circulating nurse in outpatient surgery center, 2003-2014 Cox South, RN, Labor and Delivery. 1989-1995 Christian Hospital Northwest, RN, Labor and Delivery evening charge nurse, House Supervisor. 1983-1989 Oliver C. Anderson Hospital, RN, Labor and Delivery 1982-1983.
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	Working with residents at LifeHouse 2014-2016
✓ Family/marital counseling	
✓ Social work	
✓ Case management	Medical case management LifeHouse 2014-2016.
✓ Program administration	Part of the core management team at LifeHouse 2014-2016

Title of Position: Family Strengthening Coordinator	
Name of Person:	Kaitlin Loney
Educational Degree (s): include college or university, major, and dates	Bachelor of Science-Psychology, York College Aug.2006-May 2010 Masters of Arts in Clinical Psychology, Forest Institute, Aug. 2010-December 2012
License(s)/Certification(s), #(s), expiration date(s), if applicable:	N/A
Specialized Training Completed.	N/A
# of years experience in area of service proposed to provide:	4 years
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Full time employee of LifeHouse. Employed for approximately 1 year
Describe this person's responsibilities over the past 12 months.	Provide case management support to homeless pregnant women and their families
Previous employer(s), positions, and dates	CoxHealth, Social Services Counselor, Jan. 2013-April 2015
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	Work with expectant and new mothers to help children meet developmental milestones and provided community resources to help support the mother and baby in this goal. Show effective parenting techniques.
✓ Family/marital counseling	N/A
✓ Social work	Provided resource counseling since 4/20/2015. Assessed a client's case to identify areas that need improvement.
✓ Case management	Have provided case management since 4/20/2015. Helped clients identify goals and how to achieve those goals. Provided community resources and referrals. Have worked with clients from intake to discharge to aftercare program.
✓ Program administration	Began working on policies and procedures to help organization acquire credentials. Currently on going.

Title of Position: Family Strengthening Coordinator	
Name of Person:	Peggy L. Thoenen
Educational Degree (s): include college or university, major, and dates	M.Ed - Lincoln University 2015 BSM - William Woods University 2002
License(s)/Certification(s), # (s), expiration date(s), if applicable:	
Specialized Training Completed.	Trainer- Connecting for Kids (Positive Interactions) Trainer- Prevention of Child Abuse and Neglect
# of years experience in area of service proposed to provide:	Case Management: 5
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Employee of 6 months.
Describe this person's responsibilities over the past 12 months.	Assist Resident in the development of personal and professional goals; resource development; life skill instruction.
Previous employer(s), positions, and dates	Owner/Director-Child Care Center 1992 to 2005. Buttons and Bullfrogs Early Learning Center Program Coordinator/Community Dental Education 2005-2006 Small Smiles Children's Dental Office Manager of Community Development 2006 to 2014 AETNA-MCO Lincoln University 2005 to present, Adjunct Faculty Missouri State University 2015, Adjunct Faculty
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
Early childhood development	20 years' experience working with parents and caring for children in a care setting. Facilitate undergraduate coursework in Health, Safety and Nutrition, Family and Community Resources, Program Management and Assessment and Observations and Assessment and Observations of Two and Three Year olds. Conduct community needs assessments for at risk children-provide educational materials to parents and community partners regarding methamphetamines.
Family/marital counseling	1-year practicum with the Wakonda Counseling Center assessing children exposed to marital conflict, domestic violence and family fractures.
Social work	Assisting parents in accessing special services for their children: attending IEP meetings with teachers, attending court dates with families and children regarding custody, Attainment of basic needs; housing, food, clothing, utilities, child care. Organize Thanksgiving food drive, Christmas for Kids social service community events, back to school fairs in 6 counties.
Case management	Case Managed high needs families in the child care setting; assisting with parenting skills and life skills. Managed and assisted families at the dental office regarding dental health, hygiene, "meth-mouth", early childhood caries and nutrition.
Program administration	Developed and promoted early childhood program-focus on behavioral issues; administer of Team Nutrition grant for community awareness/nutrition. Developed enhanced dental health programs for Missouri's Medicaid families, delivered and implemented community rural health initiatives (PORCH Project-

	Missouri Medicaid), re-developed member marketing materials for AETNA, contributed to the Missouri Medicaid RFP response 2006-2009-2012 and 2013 for Managed Care expansion. Administered an overall budget of \$950,000 for AETNA; \$1.2 million for Medicaid dental business model.
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EXHIBIT E**EXPERTISE OF KEY PERSONNEL - Subcontractor**

(Copy and complete this table for each key person proposed. Titles of personnel should be consistent with titles referenced throughout the RFP.)

Title of Position: Executive Director	
Name of Person:	Sr. Anne Francioni, RN, MA
Educational Degree (s): include college or university, major, and dates	Touro Infirmary School of Nursing, RN diploma 1980 University Missouri, B.A. Special Education 1992 Webster University, M.A. Management 1995
License(s)/Certification(s), # (s), expiration date(s), if applicable:	Nursing License # 093727
Specialized Training Completed.	17 years as Executive Director of Whole Kids Outreach. Numerous state and national conferences on child welfare, public health, and leadership. Certified (+ supervisor) in Healthy Families America and Growing Great Kids
# of years experience in area of service proposed to provide:	17 years as Executive Director of Whole Kids Outreach (WKO) plus 5 years as visiting nurse in Southeast MO through Nurses for Newborns of St. Louis, MO. 7 years as Director of St. Mary's Special School, developed programs for students with MR/DD. 1 year as staff in Casa Guadalupe Domestic Violence Shelter. 9 years as a staff nurse in Teaching Hospitals in MO and LA. 3 years in direct care Special School programs.
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	17 years as Executive Director of Whole Kids Outreach
Describe this person's responsibilities over the past 12 months.	Oversee all aspects of Whole Kids Outreach along with securing funds; ensure ongoing agency strategies; planning and evaluation of all programs; executive/board responsibilities; and staff development.
Previous employer(s), positions, and dates	Whole Health Outreach, home visiting nurse, 1996-1999 Cardinal Glennon Children's Hospital, St. Louis Children's Hospital, New Orleans Children's Hospital, Touro Infirmary Hospital—Staff Nurse positions 1980-1996 (with other positions within those dates) St. Mary's Special School Director of Child Care and Health Services, 1987-1993 St. Michael's Special School—Teacher assistant, 1976-77
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	See above
✓ Family/marital counseling	See above
✓ Social work	n/a
✓ Case management	See above
✓ Program administration	See above

Title of Position: Maternal-child Visiting Nurse Program Coordinator and Staff Nurse	
Name of Person:	Susan DeMent, RN
Educational Degree (s): include college or university, major, and dates	Associate of Arts in Nursing, Southeast MO State University 1983 Minor in Psychology. Coursework for BSN.
License(s)/Certification(s), #(s), expiration date(s), if applicable:	RN MO State Board of Nursing # 094908
Specialized Training Completed.	80 plus hours classroom training in Maternal Child Visiting Nurse Curriculum RN Numerous conferences on staff management, Abuse/Neglect prevention (local, state, and national), CPR instructor certification, and maternal-child health and development (documentation available on request)
# of years experience in area of service proposed to provide:	2 years of experience as Clinical Director of Whole Kids Outreach (WKO), 10 years as maternal child visiting nurse for WKO/Nurses for Newborns, 20 years' experience as clinical nurse in labor and delivery
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Employed for 10 years with Whole Kids Outreach, 2 years as Clinical Director, overseeing home visiting programs and staff.
Describe this person's responsibilities over the past 12 months.	Maternal-child Visiting Nurse Program Coordinator, home visits.
Previous employer(s), positions, and dates	1988-2004 Woman's Hospital of Texas, staff nurse, charge nurse, quality assurance officer for labor and delivery.
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	See above
✓ Family/marital counseling	See above
✓ Social work	n/a
✓ Case management	See above
✓ Program administration	See above

Title of Position: Staff Nurse	
Name of Person:	Tina Schiller, RN
Educational Degree (s): include college or university, major, and dates	Associate of Applied Science in Nursing, Three Rivers College 1995
License(s)/Certification(s), #(s), expiration date(s), if applicable:	RN MO State Board of Nursing # 137404
Specialized Training Completed.	80 plus hours classroom training in Maternal Child Visiting Nurse Curriculum RN Numerous conferences on maternal-child nursing and abuse/neglect prevention. (documentation available on request)
# of years experience in area of service proposed to provide:	4 years at WKO Staff Nurse
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Employed for 4 years with Whole Kids Outreach as staff nurse.
Describe this person's responsibilities over the past 12 months.	Maternal-child Visiting Nurse Program Staff Nurse, home visits.
Previous employer(s), positions, and dates	7/1995 – 2012 Poplar Bluff Regional Medical Center—postpartum and newborn nursery.
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	See above
✓ Family/marital counseling	See above
✓ Social work	n/a
✓ Case management	See above
✓ Program administration	See above

Title of Position: Healthy Families America Coordinator	
Name of Person:	Pamela Elledge, RN, MSN
Educational Degree (s): include college or university, major, and dates	1990 - Assoc. Nursing—Southeast Missouri State U. 1998 – BSN—Southeast Missouri State U. 2016—MSN—Southeast Missouri State U. (will complete in May 2016)
License(s)/Certification(s), #(s), expiration date(s), if applicable:	RN MO State Board of Nursing # 118729
Specialized Training Completed.	80 plus hours classroom training in Maternal Child Visiting Nurse Curriculum RN, BSN, MN Numerous conferences on maternal-child nursing and abuse/neglect prevention. Will complete Healthy Families America and Growing Great Kids certification + Supervision in 2016 (documentation available on request)
# of years experience in area of service proposed to provide:	12 years at WKO Staff Nurse, home visits 7 years as Maternal-child Visiting Nurse Program Coordinator Starting April 2016—Whole Kids Outreach Healthy Families America Coordinator 9 years as staff nurse, acute care clinical setting 2 years as clinical instructor
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Employed for 12 years with Whole Kids Outreach as staff nurse and/or coordinator in nursing and HFA programs.
Describe this person's responsibilities over the past 12 months.	Intern for master's program and Healthy Families America Coordinator, which will begin in April 2016.
Previous employer(s), positions, and dates	2002 - 2014 Whole Kids Outreach—staff nurse and Maternal-child Visiting Nurse Program Coordinator 2015 -2016 Clinical Instructor—Southeast State U. 1990 – 2002 Southeast Missouri Hospital—staff nurse 1994 – 1999 Madison Medical Center—staff nurse 1992 – 1994 Eldercare—staff nurse
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	See above
✓ Family/marital counseling	See above
✓ Social work	n/a
✓ Case management	See above
✓ Program administration	See above

Title of Position: Healthy Families America Supervisor	
Name of Person:	Jessica Williams, MS
Educational Degree (s): include college or university, major, and dates	2007—MS Psychology 2005—BS Psychology
License(s)/Certification(s), #(s), expiration date(s), if applicable:	n/a
Specialized Training Completed.	Extensive training in child abuse/neglect, case management and parenting education. Will complete Healthy Families America and Growing Great Kids certification + Supervision in 2016 (documentation available on request)
# of years experience in area of service proposed to provide:	8 years working with families (in their homes) at risk of having their children removed by Children's Division.
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Beginning employment with Whole Kids Outreach in April 2016 as a Healthy Families America Supervisor
Describe this person's responsibilities over the past 12 months.	Worked with families in crisis to prevent removal; advocate for clients' rights and services; and provide referrals for resources in the community.
Previous employer(s), positions, and dates	Aug. 2011 – present—Adjunct Instructor, Human Development July 2012 – present—Intensive In-Home Specialist, Family Facets April 2008 – 2014—Online Instructor, Heald College, Psychology courses. April 2008 – June 2014—Intensive In-Home Service Worker, A.O. Community Services
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	See above
✓ Family/marital counseling	See above
✓ Social work	n/a
✓ Case management	See above
✓ Program administration	See above

Title of Position: Outreach Specialist, Healthy Families America	
Name of Person:	Kim Harwell
Educational Degree (s): include college or university, major, and dates	High School Diploma, Hours towards Medical Technician, Three Rivers Community College
License(s)/Certification(s), #(s), expiration date(s), if applicable:	n/a
Specialized Training Completed.	40 + hours classroom training plus 6 weeks of supervised home visits. Multiple conferences and trainings on topics including: Protective Factors, Child Abuse/Neglect, Leadership, Domestic Violence, Autism, SIDS, Smoking Cessation, and Teen Parents. Certification in Healthy Families America and Growing Great Kids + supervisor (documentation for the above available upon request)
# of years experience in area of service proposed to provide:	10 years of experience providing in-home visitation to families and their children with Whole Kids Outreach
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Employed for 10 years with Whole Kids Outreach as an Outreach Specialist (home visitor).
Describe this person's responsibilities over the past 12 months.	Home visits delivering the Healthy Families America program.
Previous employer(s), positions, and dates	2004-2006 Car- Mart Car Sales, secretary
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	See above
✓ Family/marital counseling	See above
✓ Social work	n/a
✓ Case management	See above
✓ Program administration	See above

Title of Position: Outreach Specialist, Healthy Families America	
Name of Person:	Stephanie Buxton
Educational Degree (s): include college or university, major, and dates	High School Diploma
License(s)/Certification(s), #(s), expiration date(s), if applicable:	n/a
Specialized Training Completed.	40 + hours classroom training plus 6 weeks of supervised home visits. Empowering Mandated Reporters to Protect Children—2014 Healthy Families America Core Training—2013 Integrated Strategies for Home Visiting—2013 Growing Great Kids Prenatal to 36 months Tier 1 Certification—2014 Child Abuse and Domestic Violence—2013 Supervisor training for HFA and GGK
# of years experience in area of service proposed to provide:	2.5 years of experience providing in-home visitation to families and their children with Whole Kids Outreach
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Employed for 2.5 years with Whole Kids Outreach as an Outreach Specialist (home visitor).
Describe this person's responsibilities over the past 12 months.	Home visits delivering the Healthy Families America program.
Previous employer(s), positions, and dates	Gastineau Hardware and Lumber 2011-2012 Bella Rose Floral Boutique 2010-2011 Securitas Security Service USA 2007-2010 SSM Healthcare St. Mary's 2006-2007
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	See above
✓ Family/marital counseling	See above
✓ Social work	n/a
✓ Case management	See above
✓ Program administration	See above

Title of Position: Outreach Specialist, Healthy Families America	
Name of Person:	Nichole Gillis
Educational Degree (s): include college or university, major, and dates	High School Diploma BFA Interior Design, Central MO State University
License(s)/Certification(s), #(s), expiration date(s), if applicable:	n/a
Specialized Training Completed.	40 + hours classroom training plus 6 weeks of supervised home visits. Multiple conferences and trainings on topics including: Protective Factors, Child Abuse/Neglect, Leadership, Domestic Violence, Autism, SIDS, Smoking Cessation, and Teen Parents. Certification in Healthy Families America and Growing Great Kids (documentation for the above available upon request)
# of years experience in area of service proposed to provide:	1.5 years of experience providing in-home visitation to families and their children with Whole Kids Outreach
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Employed for 1.5 years with Whole Kids Outreach as an Outreach Specialist (home visitor).
Describe this person's responsibilities over the past 12 months.	Home visits delivering the Healthy Families America program.
Previous employer(s), positions, and dates	First Baptist School 2013-2014 Poplar Bluff R-I School District 2007-2013 Walmart 2005-2011
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	See above
✓ Family/marital counseling	See above
✓ Social work	n/a
✓ Case management	See above
✓ Program administration	See above

Title of Position: Outreach Specialist, Healthy Families America	
Name of Person:	Tanya Hampton
Educational Degree (s): include college or university, major, and dates	High School Diploma Cosmetology License, Ozark Beauty Academy
License(s)/Certification(s), #(s), expiration date(s), if applicable:	n/a
Specialized Training Completed.	40 + hours classroom training plus 6 weeks of supervised home visits. Multiple conferences and trainings on topics including: Protective Factors, Child Abuse/Neglect, Leadership, Domestic Violence, Autism, SIDS, Smoking Cessation, and Teen Parents. Certification in Healthy Families America and Growing Great Kids (documentation for the above available upon request)
# of years experience in area of service proposed to provide:	1.5 years of experience providing in-home visitation to families and their children with Whole Kids Outreach
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Employed for 1.5 years with Whole Kids Outreach as an Outreach Specialist (home visitor).
Describe this person's responsibilities over the past 12 months.	Home visits delivering the Healthy Families America program.
Previous employer(s), positions, and dates	Owner/Operator of The Hair Co. Unlimited 1999-2013
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	See above
✓ Family/marital counseling	See above
✓ Social work	n/a
✓ Case management	See above
✓ Program administration	See above

Title of Position: Outreach Specialist, Healthy Families America	
Name of Person:	Melinda Hill
Educational Degree (s): include college or university, major, and dates	High School Diploma CNA and CMT training courses, Brent B. Tinnin Manor
License(s)/Certification(s), #(s), expiration date(s), if applicable:	CNA# 23405A CMT# 6899MT
Specialized Training Completed.	40 + hours classroom training plus 6 weeks of supervised home visits. Multiple conferences and trainings on topics including: Protective Factors, Child Abuse/Neglect, Leadership, Domestic Violence, Autism, SIDS, Smoking Cessation, and Teen Parents. Certification in Healthy Families America and Growing Great Kids (documentation for the above available upon request)
# of years experience in area of service proposed to provide:	1.5 years of experience providing in-home visitation to families and their children with Whole Kids Outreach
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Employed for 1.5 years with Whole Kids Outreach as an Outreach Specialist (home visitor).
Describe this person's responsibilities over the past 12 months.	Home visits delivering the Healthy Families America program.
Previous employer(s), positions, and dates	Butler County Health Department In Home Services 2007-2014 Brent B. Tinnin Manor 2006-2007 Mineral Area Regional Medical Center 2001-2004 BJC Healthcare 1999-2000
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	See above
✓ Family/marital counseling	See above
✓ Social work	n/a
✓ Case management	See above
✓ Program administration	See above

Title of Position: Outreach Specialist, Healthy Families America	
Name of Person:	Molly Reynolds
Educational Degree (s): include college or university, major, and dates	High school diploma, coursework towards Associate's degree
License(s)/Certification(s), #(s), expiration date(s), if applicable:	n/a
Specialized Training Completed.	40 + hours classroom training plus 6 weeks of supervised home visits. Multiple conferences and trainings on topics including: Protective Factors, Child Abuse/Neglect, Leadership, Domestic Violence, Autism, SIDS, Smoking Cessation, and Teen Parents. Certification in Healthy Families America and Growing Great Kids (documentation for the above available upon request)
# of years experience in area of service proposed to provide:	1.5 years of experience providing in-home visitation to families and their children with Whole Kids Outreach
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Employed for 1.5 years with Whole Kids Outreach as an Outreach Specialist (home visitor)
Describe this person's responsibilities over the past 12 months.	Home visits delivering the Healthy Families America program
Previous employer(s), positions, and dates	6/14 -9/14 Lil Black River Café -server; 8/12 - 5/14 Tag Truck Center -admin assistant; 5/11 - 3/12 Dennis and Poppy Daniels -private child care provider; 4/04 - 8/10 Murfreesboro Pharmaceutical Supply -quality assurance
Identify specific information about experience in:	
✓ Early childhood development	See above
✓ Family/marital counseling	See above
✓ Social work	n/a
✓ Case management	See above
✓ Program administration	See above

Title of Position: Program Support Coordinator and Healthy Families America Supervisor	
Name of Person:	Connie Pendley
Educational Degree (s): include college or university, major, and dates	Associates Degree, Executive Secretarial-Science/Computer Networking Mineral Area College in Flat Rivers, MO—May 1993 Associate Degree in Medical Billing and Coding from AmeriTech College in Dravo Utah (online), May 2014
License(s)/Certification(s), #(s), expiration date(s), if applicable:	Medical/Dental Office Assistant Diploma—Professional Career Development Institute—1995 MBC Certified—August 2014
Specialized Training Completed.	Healthy Families America and Growing Great Kids certified + Supervisor. Ongoing training in database management through Winona State University, Computer Science Department and IT consultants—2004 - present
# of years experience in area of service proposed to provide:	13 years
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Employed at Whole Kids Outreach as Program Support Coordinator.
Describe this person's responsibilities over the past 12 months.	Management of all WKO program data bases, assistance to home visitors and other programs staff, Assistant Camp Director, queried information from data base for grant reports, assistance with incoming revenue tracking, preparation and management of home visitors tracking tools, and maintenance of WKO computers and server system. Referral intake.
Previous employer(s), positions, and dates	Mineral Area College, Nursing Dept., Secretary Aid (work study program)—1990-1993 Centerville R-I School District, Secretary, Bookkeeper—1993-2004
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	See above
✓ Family/marital counseling	See above
✓ Social work	n/a
✓ Case management	See above
✓ Program administration	See above

PROPOSED METHOD OF PERFORMANCE

EXHIBIT F**METHOD OF PERFORMANCE - Vendor**

The vendor should present a written plan for performing the requirements specified in this Request for Proposal. In presenting such information, the vendor should specifically address each of the following issues:

- 1. Identify the service location as well as any satellite locations. Describe the geographic proximity of the services being proposed to the majority of clients to be served. Describe how women initially access services and locate the service location.**

Catholic Charities of Southern Missouri (CCSOMO) has offices in Cape Girardeau, Sikeston and Van Buren and will serve all the counties in Regions 8 and 9 under the ATA contract. Whole Kids Outreach (WKO) a sub-grantee has an office in Ellington and will also serve clients in Carter, Reynolds, Shannon Counties in Region 8 and Butler, Iron, and Wayne Counties in Region 9. Clients will have choice as to which agency in the six counties that both agencies cover provides the client's services. Offices are open 9 am-5pm, Monday through Friday, excluding holidays. A 24-hour number is available for emergencies, after hour and weekend calls and a case manager is on call to answer and respond to these requests.

Clients can call the office or be referred by other collaborative partners in the local communities including other social service agencies, health care clinics, churches, food pantries, shelters, etc. Family Strengthening Coordinators (FSCs)/case managers will schedule appointments with the client to meet at the office, their home or other location. Many clients in the rural areas do not have access to reliable transportation so often the FSC travels to client's home and/or location. The vendor understands that the decision to access the Alternatives to Abortion Program rests solely with the pregnant woman.

Pregnant women and their families can access most services within a 50-mile radius. Most of the clients are referred to the program. CCSOMO and WKO both have an established network of relationships with local community agencies and organizations including healthcare providers, such as pediatricians and obstetricians, area shelters, county health departments, Division of Family Service caseworkers, school personnel, VA services, landlords and churches.

Catholic Charities of Southern Missouri's LifeHouse Crisis Maternity Home and After Care Program for homeless pregnant women and their young children is located in Springfield. LifeHouse provides safe housing and comprehensive services for up to 20 homeless pregnant women and 30 infants and young children. LifeHouse accepts referrals from health care providers, substance abuse treatment centers, courts, shelters, churches, social service agencies and self-referrals for southwest Missouri including all the counties in region 7 except St. Clair. Upon receiving a call from a homeless pregnant woman or a referral, an appointment is scheduled with the potential resident to complete an intake and explain the program. The homeless pregnant woman can be at any stage of pregnancy. Upon entering the residential program, women and their children may stay up to year following delivery as they work towards self-sufficiency.

- 2. Describe the demographic profile of the at-risk population to be served. Describe outreach strategies for reaching the targeted at-risk population(s), including strategies for addressing the cultural diversity of targeted clients**

The target population in Regions 8 & 9 includes pregnant women and teens, parents, infants, and children residing in the remote, rural areas of the southeast Missouri Ozarks, focusing on at-risk groups and families who live in poverty; families with histories of (or on-going) abuse and neglect; pregnant and parenting teens, as well as first-time parents. Children and pregnant/parenting women living in these counties are especially vulnerable to domestic violence and abuse (physical, emotional, sexual, and drug). Additionally, these families have inadequate social support, lack transportation, and have insufficient access to medical care. Their family and community histories are frequently marked by adversities that affect parenting capacity and orientation to the parenting role. Poverty and social isolation place these families at risk of adverse health outcomes resulting from chronic financial strain, poor housing, and

decreased access to care. Immobilized by depression and/or feelings of helplessness, many families in these rural Missouri counties feel incompetent to address these issues, which adversely affect their health and place them at extreme risk for poor health outcomes and child maltreatment. In CCSOMO's and WKO's rural service region there is little racial or ethnic diversity. County Health Rankings (2014) show that where we live matters to our health; more than 83% of the service counties fall into the bottom quartile ranking of overall health factors

(<http://www.countyhealthrankings.org/app/missouri/2014/overview>).

Most client are referred to the program. Both CCSOMO and WHO have a network of relationships with local community agencies and organizations which is the major source of referral. Pregnant teens and women, and/or families are referred by healthcare providers, such as pediatricians and obstetricians, area shelters, county health departments, Division of Family Services caseworkers, school personnel and by word of mouth. Most referrals are received by phone, fax or email. CCSOMO has also established strong partnerships with other social service agencies by being an active member of the Balance of State Continuum of Care and regularly attending the regional housing meetings.

To increase awareness of the programs, outreach will include face-to-face meetings with possible referral sources such as school counselors and principals, physicians and county health center employees. Information about services will be offered at community events and brochures/flyers distributed to local social service providers.

LifeHouse Crisis Maternity Home (ATA Region 7) serves homeless pregnant women and their children under age 5 with safe housing and comprehensive social services. Since opening in 2013, over 70% of the residents met the definition of chronically homeless, over 50% have histories of substance abuse and domestic violence, and over 50% have mental health issues in addition to many other challenges. Referrals to LifeHouse come from many sources including self-referral. Outreach is directed to all in the community with special emphasis on other homeless provider programs like the Rare Breed program for homeless youth, Safe to Sleep (homeless shelter for women), domestic violence shelters, churches, the Division of Family Services, and more. Springfield and southern Missouri are less diverse than many communities, however homelessness has no boundaries; CCSOMO and LifeHouse serve all. If a client has special cultural diversity needs, we make every effort to meet those needs. CCSOMO and LifeHouse have access to prenatal and postnatal literature in several languages and interpreter services for most languages. The LAMP program is available to the agency and provides interpreter services in over 50 languages.

3. Describe the marketing of services.

CCSOMO and WKO both have websites and Facebook pages that offer information on available services including ATA and provide contact information for those seeking services. CCSOMO has developed brochures that provide information on the programs: Healthy Moms, Healthy Babies (ATA) and LifeHouse Crisis Maternity Home. The brochures explain the programs and eligibility requirements and provide a phone number to request services. CCSOMO and WKO have a well-established network of providers, including local and regional health providers and county health centers that serve as referrals for the ATA program. In addition, the other programs CCSOMO provides in these areas such as Homeless Prevention, Supportive Services for Veteran Families, and home repairs for low-income families have established partnerships with local social service agencies that provide referrals for the ATA program. CCSOMO's Director of Communications will evaluate other marketing opportunities in the media including possible PSAs. CCSOMO and WKO will also follow any requirements for publicity listed in 2.11.14.

4. Identify the site where the Individual Risk and Needs Assessment and Initial Client Assessment will be conducted. Describe how client eligibility will be determined.

The ATA program in Regions 8 & 9 will most often complete the assessments in the client's home. Both CCSOMO and WKO have offices where potential clients could also access services including the initial assessment. CCSOMO has offices in Van Buren, Sikeston and Cape Girardeau and WKO in Ellington. The case manager will assess and determine if the woman meets the ATA eligibility requirements: be a Missouri

resident, be at or below 185% of federal poverty level based on the client or family income, pregnant with the intent to carry the unborn child to term, and is not receiving ATA Program services from another provider.

Case managers at a face to face meeting will use the following to determine identification and income documentation: utility bills; driver's licenses; pay stubs; written employer statements; and social security benefits statements. The vendor will maintain documentation of eligibility for a minimum of 5 years for each woman determined eligible for ATA program.

If client meets eligibility requirements and signs a written consent to receive ATA Program services, then the client will be admitted to program. Within 24 hours a case manager will do an individual Risk and Needs Assessment to address urgent issues and an Initial Client Assessment will be completed within 7 days by a professional case manager.

LifeHouse conducts an initial assessment interview per telephone and determines eligibility based on the information listed above. Then the potential resident meets with the case manager at LifeHouse to do the Individual Risk and Needs Assessment and the Initial Face-to-face Client Assessment. If a potential resident is unable to meet at LifeHouse due to current circumstances such as residing in substance abuse center, jail, or lack of transportation, staff will make arrangements to meet face-to-face at another location. The results of this process are shared with the core LifeHouse team (LifeHouse Director, both Case Managers, Program Coordinator, Registered Nurse, and the Licensed Professional Counselor). They meet to discuss resident needs and resources before a resident move-in date is scheduled. LifeHouse residents must be pregnant, homeless, age 18 or older, income below 185% of poverty, Missouri resident and pass a drug screening test to reside at LifeHouse Crisis Maternity Home.

In addition to the details listed above, CCSOMO and WKO will follow RFP sections 2.5.2-2.5.3.

5. Describe the development and updating of the Individualized Pregnancy Continuation Plan including the involvement of the client in the process.

The Individualized Pregnancy Continuation Plan (IPCP) will be developed by the professional and client working together during the first 1-3 home visits and within ten days of the client's admission to the program. The Individualized Risk and Needs Assessment and the Initial Client Assessment (conducted by professional case manager) are considered in this process and urgent issues addressed. IPCP includes specific measurable objectives, timelines, and strategies for client education and identification of necessary additional services and referrals as well as outcome goals for referrals. This client centered plan will guide the case management process over the duration of the pregnancy and will continue for one-year post-partum. The plans are strengths based and results from screening tools such as the Ages and Stages Questionnaire (ASQ), Kotelchuck (adequate prenatal care) and Arizona Self-Sufficiency Matrix will be used to identify needed goals and objectives. The plans will be reviewed and updated with the client at each subsequent visit, at least every thirty days, and changes documented within the client record and plan. The focus of the plan is to provide education and access to additional services that allows the client to continue the pregnancy and leads to healthy outcomes, nurturing families, and a path to self-sufficiency. Case manager will continue to assess the client for domestic violence and safe sleep environment for client's infant, provide education on the 2011 American Academy of Pediatrics Recommendations and a professional will complete the EPDS.

The LifeHouse Individualized Pregnancy Continuation Plan is created with the resident within a week of admission to the transitional housing program and updated on a weekly basis. The LifeHouse registered nurse and case managers work closely with the resident to meet goals and comply with optimum care. Both the case management and the nurse's office are located within LifeHouse for easy and frequent access. LifeHouse partners with local social service agencies to provide additional services and resources such as Parents as Teachers and Early Head Start, which met with residents on-site.

In addition to the information presented above, CCSOMO and WKO will follow all the RFP in sections 2.54d-e.

6. Provide a detailed description of the case management process. Identify the hours of service including emergency coverage outside of business hours and weekends.

CCSOMO offices in Cape Girardeau, Sikeston and Van Buren are open Monday-Friday, 8 am to 5 pm, excluding holidays. Appointments are scheduled evenings and weekends if necessary. CCSOMO operates a phone number that is answered 24 hours a day, seven days a week for emergencies and answered by the case manager on-call.

All CCSOMO case managers regardless of the program, work with clients in a holistic and individualized manner using a family strengthening model that empowers clients in the decision-making process. CCSOMO will ensure that ATA case manager manages the service needs of the client and performs all required case management responsibilities designed to minimize the risk of abortion, improve the pregnancy outcome and move the family towards self-sufficiency. The case management process occurs over time with multiple visits with client taking place primarily in the home or office, face-to-face. Utilizing motivational interviewing techniques and building on clients strengths the plan that develops includes education and employment opportunities that can lead to self-sufficiency.

CCSOMO has established community linkages and collaborates with other social service providers and government agencies to assist clients in receiving public benefits and needed services. The case manager will assist in the client in applying of MO HealthNet, the Supplemental Nutrition Program Women, Infants, and Children (WIC), Supplemental Nutrition Assistance Program (SNAP), child care assistance, and/or the Low-Income Home Energy Assistance Program (LIHEAP) as well as other resources available in local community.

Subcontractor, WKO hours of service are Monday through Friday, 9am-5pm. The Outreach Specialists and RNs do, however, make exceptions to accommodate families' schedules, when possible. Additionally, each home visitor carries a company cell phone and they are available for emergencies.

WKO caseload limits are determined by an acuity system that describes the number of families and visits/month and families. Each Outreach Specialist meets with an HFA certified supervisor weekly to review her caseload and problem solve/plan to help meet the families' needs. Likewise, the RNs meet monthly with a supervisor from Nurses for Newborns.

The outreach specialists and nurses provide services through home visits to expectant parents throughout the prenatal period, beginning as early in the pregnancy as possible (depending on when the referral is received). Fathers or other parenting partners are also included as possible. Nursing services begin during pregnancy and extend as needed, but typically for 8 weeks, at which time, and outreach specialist will either begin or continue seeing the family in the ATA program. Each family has an individualized plan that is developed with the parent(s) to direct learning sessions (modules) and community referrals. Nurses provide health assessments and education at each visit and collaborate with the WKO outreach specialists. The specialists works closely with other community service providers as needed.

In addition to the descriptions listed above, CCSOMO and WKO will follow the RFP requirements listed in 2.5.4.

LifeHouse is a 24/7 residential facility with support staff around the clock. Case Managers are available Monday thru Friday from 7:30am to 5:00pm and on occasional evenings and weekends. Case Managers rotate weekly call, so there is always someone on call to assist if needed. This includes holidays.

7. Provide a preliminary outline and description of the proposed content of the required trainings. Additionally, provide copies of any training materials (e.g. manuals, resource books, handouts, reinforcement materials) proposed for use in conducting the training sessions.

CCSOMO and WKO provide Prenatal Parent Education and Parenting Skills Training covering each of the following topics for a minimum of thirty (30) minutes per topic:

- Safe sleep for infants following the 2011 American Academy of Pediatrics Recommendations;
- Breastfeeding;
- Importance of taking folic acid in the prevention of neural tube defects;
- Use of substances during pregnancy including alcohol, tobacco, and other drugs;
- Importance of prenatal care;
- Immunizations;
- Shaken baby syndrome;
- Car seat safety; and
- Nutrition and healthy eating.
- Additional topics as required under ATA contract

Whole Kids Outreach utilizes the Healthy Families America model of service delivery. The HFA program uses the Growing Great Kids curriculum. It includes research-informed, strength-based & solution-focused "Home Visit Conversation Guides" for engaging parents, cultivating secure attachments, and bolstering child development, while building parenting, family strengthening & other essential life skills with parents who themselves have experienced childhood adversity and other traumatic events. GSK curriculum includes modules on: nurturing parental resiliency; advancing individual & family functioning; reducing a child's exposure to toxic stress; nurturing parents' problem-solving skills; strengthening the families' support networks; and enabling parents to construct protective buffers around their children.

The Whole Kids Outreach Maternal-child Visiting Nurse program utilizes the Nurses for Newborns model of service delivery. Nurses utilize their clinical skills and present a variety of educational topics and tools designed to address identified issues and support family strengths and improve parenting skills. Nurses advance appropriate infant/child development, and help parents access external resources as needed.

CCSOMO's programs utilize multiple resources and curriculums including the Injoy Birth and Parenting Education Curriculum and videos, March of Dimes "Becoming a Mom" curriculum and Heritage House "Earn While You Learn" modules and curriculum. In addition, materials from the Missouri Department of Health and Senior Services, Children's Trust Fund and Missouri Foundation for Health are used. All cover the required topics and the additional handouts and brochures are used to supplement the curriculum and expand on topics. CCSOMO will follow all the requirements outlined in RFP section 2.6. See attached list of resources.

8. Describe each of the Additional Client Services specified in the RFP. Explain the service delivery system including any referral network and referral plan. Describe the cultural competency of providers.

CCSOMO and Whole Kids Outreach staff are all members of their local community and have established networks with other organizations that can provide additional client services listed in the RFP. Examples include: Saint Francis Medical Center, Community Counseling Center, Bootheel Counseling Services, Head Start, East Missouri Action Agency, Delta Area Economic Opportunity Council, South Central Missouri Action Agency, Birthright, Case Guadalupe, Whole Health Outreach, Family Counseling Center, local VoTech schools, local food pantries, physicians and clinics, shelters, school counselors, landlords, and more.

During each home visit, families will be assessed for needs that would support the mothers' ability to deliver a healthy newborn, as well as care for him/her and any other children. Clothing, food, housing/rent assistance, utilities, and transportation to medical and/or social services will be provided if no community resource can be identified and accessed. In addition, the case managers will support mothers and fathers to continue and/or complete at least a high school degree or GED, as well as promote skills necessary for gainful employment. Case managers will assist the client in accessing additional services based on the IPCP. Additional services will be provided in the manner that will provide maximum effectiveness for each dollar expended and meet all the requirements listed in RFP for Additional Client Services. Additional Services (2.7 a-r) include:

- Prenatal Care
- Medical Care
- Mental Health Care
- Newborn or Infant Medical Care
- Adoption Assistance
- Child Care
- Clothing
- Domestic Abuse Protection
- Drug and Alcohol Testing and Treatment
- Education Services
- Food
- Housing
- Utilities
- Job Training and Placement
- Supplies-relating to pregnancy, newborn care and parenting
- Transportation to access services
- Ultrasound Services
- Other services.

9. Describe how the information obtained in the client satisfaction is utilized to improve upon services provided.

Meetings will be scheduled between WKO Clinical Director and the CCSOMO Leadership team upon receiving the results of the survey. The group will review and evaluate the survey results and outcomes. Strategies will be developed and immediately implemented to address any substantiated problems. (Follow RFP section 2.8.3)

WKO will also use this information is used in conjunction with other client data to analyze areas of needed growth and change. The information will be discussed at monthly meetings with either just the home visiting program administration or with the entire staff to generate strategies to address any problem area. WKO will utilize the national HFA office and Nurses for Newborns, along with consulting evaluators from St. Louis University School of Public Health for technical support as needed. In addition, the HFA Advisory Board will review the outcomes of the client satisfaction surveys.

In addition to the ATA client satisfaction survey that will be used, LifeHouse has a weekly resident house meeting where information is shared and residents have the opportunity to contribute ideas, make suggestions, or voice concerns. LifeHouse is also working with Missouri State University to create a resident exit survey to assist in evaluating the program. The LifeHouse Director is available to residents for any concerns either on-site or by telephone if needed.

10. Describe the plan for developing and implementing an evaluation and continuous quality improvement plan. Include evidence of evaluation and continuous quality improvement process activities that evaluate (1) infrastructure, (2) method of delivery of services, (3) outcomes, and (4) compliance with standards and licensure.

(1) Infrastructure

CCSOMO Regional Director and the Regional Supervisor based in Cape Girardeau review all inputs into the ATA system for the agency and the subcontractor, as well as all documentation within the CaseWorthy database system. Approval of all billings is reviewed by the Regional Director and Director of Accounting before submission. Reports are generated and reviewed by the Director of Administration and PQI, Director of Accounting, and the CCSOMO ATA leadership team along with the WHO leadership. These reports monitor and track the delivery of services, the quality measured by

satisfaction surveys and outcome measurements, and utilization of ATA funds so changes can be made as part of the process for performance and quality improvement (PQI).

(2) Method of delivery of services, and (3) Outcomes

In March 2015, CCSOMO implemented CaseWorthy, a new case management software system to provide CCSOMO a comprehensive database for grants management and the ability to measure performance and outcomes as well as track services, referrals, billings and review case notes by each case manager. The client records document eligibility, all intakes and assessments, IPCP plan, and completed education requirements. CCSOMO's Director of Administration and PQI reviews all programming and grants to make sure all grant requirements and deadlines are met.

WKO will use a sophisticated, automated tracking and evaluation system for child and adult level data that was created in collaboration with Winona State University's computer science department. WKO's home visitors will create visit records to collect data needed to measure the project's objectives including: demographics, developmental screenings (e.g. Ages and Stages Questionnaire (ASQ), Ages and Stages Questionnaire: Social Emotional (ASQ-SE)), prenatal care, pregnancy outcomes, child health, social needs, risk factors for child maltreatment, Protective Factors Survey (PFS), and progress achieving family goals. The system includes a process of review by supervisors for each visit record before it is submitted to the master database. In collaboration with St. Louis University and the University of Kansas, data will be analyzed using descriptive analyses and comparisons at different points in the program to show outcomes. WKO will continue to work with Winona State University's Computer Science Department for IT support.

Data and outcome measurements from both CCSOMO and WKO will be evaluated to ensure that agencies are meeting the grant requirements for delivery of services and outcomes.

(4) Compliance with standards and licensure

Family Strengthening Coordinators/case managers (professional and non-professional) and supervisors are required to have background checks prior to providing service and will be rechecked every two years. This includes meeting all the pre-screenings included in the RFP.

CCSOMO's Board and staff has committed to beginning the COA (Council on Accreditation) process in 2016. This accreditation process will require the agency to be reviewed on all aspects of governance, fiscal controls, policy and programming to assess if the agency is meeting national standards; this accreditation process is estimated to take a minimum of 18 months, culminating in accreditation by 2018. CCSOMO completes an annual audit facilitated by BKD and includes a A-133.

CCSOMO's fiscal and performance improvement policies address compliance and risk issues. A site review and chart audits of subcontractor WKO is to be completed annually by CCSOMO Regional Director and Regional Supervisor, who oversee the ATA program. Connie Pendley, WHO Program Support Coordinator, will act as the liaison between Whole Kids Outreach and Catholic Charities to ensure compliance with standards and licensure. Meetings are held between CCSOMO and WHO leadership to discuss the program, outcomes and client satisfaction surveys so that improvements can be identified and made to the program (PQI plan). Director of Administration and PQI complete final reviews of all data and reports, to ensure agency is meeting grant requirements.

- 11. Identify the method of evaluation including indicators that can be measured for continuous quality improvement and capture the data necessary to evaluate the program impact. The plan should address plans and method to improve the program components and continuous quality improvement process activities.**

Both CCSOMO and WKO utilize computer systems for recording data and tracking outcomes. Staff is trained to carefully document and report on program indicators and outcomes. These include utilization of service referrals, prenatal care, healthy maternal outcomes (any changes in health/lifestyle such smoking,

drugs, drinking, better nutrition), birthing outcomes, birth weight, number of mother breastfeeding, etc. Staff continually assesses and documents client progress towards goals and objectives outlined in the IPCP. Outcome and data are reviewed regularly by the ATA Leadership team and WKO to identify any areas of improvement needed.

The anticipated outcomes for the women and children served at LifeHouse, despite all of the complex histories of the residents that lead to being homeless and pregnant are: (1) residents will deliver safely and have healthy infants that do not require or have minimal time in the Neonatal Intensive Care Unit; (2) residents will also decrease their use of the Emergency Department for non-emergent care; (3) child abuse and neglect will be decreased because of the parenting classes, counseling and supportive environment; (4) current and former residents will move toward or achieve self-sufficiency through increased education and employment; (5) and former residents are able to obtain and retain permanent housing.

- 12. Organizational Chart - The vendor should provide an organizational chart showing the staffing and lines of authority for the key personnel to be used. The organizational chart should include (1) The relationship of service personnel to management and support personnel, (2) The names of the personnel and the working titles of each, and (3) Any proposed subcontractors including management, supervisory, and other key personnel.**

- **The organizational chart should outline the team proposed for this project and the relationship of those team members to each other and to the management structure of the vendor's organization.**

Organizational chart is attached following Exhibit F.

- 13. Along with a detailed organizational chart, the vendor should describe the following:**

- **How services of the contract will be managed, controlled, and supervised in order to ensure satisfactory contract performance.**

CCSOMO is the vendor of this contract and the overall responsibility for satisfactory performance is assumed by the agency's Executive Director and ATA leadership team. The ATA leadership team includes the Director of Finance who reviews billings and is responsible for meeting fiscal and auditing obligations. The Director of Administration and PQI (Performance Quality Improvement) provides oversight of all data and outcome measurements to ensure agency and subcontractor are meeting grant requirements. Director of Communications is responsible for marketing and outreach efforts.

The Regional Director and Regional Supervisor, based in Cape Girardeau are responsible for oversight of the day to day ATA program including: services provided by the professional and non-professional case managers; completing client chart audits; signing timesheets; approval of ATA expenses; and, submission of ATA reports for Region 7, 8 & 9. The Director of LifeHouse will work closely with the Director in Cape Girardeau to ensure that all requirements listed above are met and reports are submitted accurately and on time. The Regional Director will be the point of contact with Missouri Office of Administration for any questions or concerns.

CCSOMO Regional Director and the Director of Administration and PQI will provide oversight of the WKO program and completely a yearly audit and site review to ensure compliance with contract requirements and performance.

- **Total Personnel Resources - The vendor should provide information that documents the depth of resources to ensure completion of all requirements on time and on target. If the vendor has other ongoing contracts that also require personnel resources, the vendor should document how sufficient resources will be provided to the State of Missouri.**

CCSOMO and subcontractor WKO have the ability and resources to meet the contractual requirements on time and on target. Both agencies worked together the past 4 years on the current ATA contract and were successful in providing quality services in regions 8 & 9. Clients have multiple sites to access services and choice of vendor they use. Both agencies have allocated staff and resources to meet ATA targets. See attached organizational chart.

CCSOMO and subcontractor WKO have experience operating and providing services under multiple contracts and have successfully met grant requirements based on information contained in Exhibit D which shows multiple renewals of contracts/grants/

14. Economic Impact to Missouri - The vendor should describe the economic advantages that will be realized as a result of the vendor performing the required services. The vendor should respond to the following:

- **Provide a description of the proposed services that will be performed and/or the proposed products that will be provided by Missourians and/or Missouri products.**

All services provided by CCSOMO and WKO under this ATA contract will be performed Missouri residents and all agency offices are located within Missouri.

- **Provide a description of the economic impact returned to the State of Missouri through tax revenue obligations.**

Lifehouse Crisis Maternity Home provides access and transportation to community-based resources and prenatal and post-delivery health care services which are critical. Having reliable transportation to prenatal care, as well as accountability to keep appointments is vital to a healthy baby. Without prenatal care, many babies are at higher risk to be born pre-term and have lower birth weights, which leads to a greater risk of a NICU stay and long term disabilities. The average daily cost of NICU care in the United States exceeds \$3,000. The *Chicago Tribune* reports that the average length of stay in the NICU is 27 days. So the average expenditures are nearing \$100,000 per NICU stay. Since opening in December 2013, LifeHouse Crisis Maternity Home has had 30 healthy babies born to high-risk mothers saving the community and state an estimated \$2 million in health care expenses from lack of expected NICU stays and this does not include the possible longer term expenses from babies born with disabilities.

- **Provide a description of the company's economic presence within the State of Missouri (e.g., type of facilities: sales offices; sales outlets; divisions; manufacturing; warehouse; other), including Missouri employee statistics.**

CCSOMO Administrative offices and LifeHouse Crisis Maternity Home are located in Springfield, Missouri. CCSOMO has Family Strengthening Centers (offices) located in Cape Girardeau, Sikeston, Van Buren, Joplin and a satellite in Poplar Bluff. In addition, CCSOMO operates a separate office in Cape Girardeau for Targeted Case Management for the Developmentally Disabled in Cape County. CCSOMO operates a Donation Center and Thrift Store called GoodFinds in Joplin, and rents a warehouse for building materials for CCSOMO's home repair and rebuilding program, "Rebuilding Homes. Rebuilding Lives." CCSOMO employs over 70 employees throughout southern Missouri. The agency also utilizes volunteers on many of the home repair and disaster recovery projects and they donate time and often materials to these projects. CCSOMO's 2015-2016 budget is \$4.9 million.

EXHIBIT G

IMPLEMENTATION PLAN

Implementation or Readiness Plan - The vendor should sequentially list and briefly describe the tasks or events proposed for the implementation of the required services. If no tasks or events are required, the vendor should provide a statement of readiness. For each task/event identified, the vendor should identify the number of days required to complete the task/event, the personnel proposed to perform the task/event, and the number of work hours for each person.

- **Completion Day** should be specified as a certain number of days from state agency authorization to proceed with services until completion of the specific task and should be expressed as calendar days, not specific dates.
- **Assigned Personnel** should be identified by name rather than project title unless such personnel are yet to be hired.
- **Workhours** should indicate that time each assigned person will spend on the specific task.

[illegible]

EXHIBIT H**CLIENT SCENARIO**

The vendor should present a written narrative which demonstrates the method or manner in which the vendor proposes to satisfy the requirements of the Request for Proposal to conduct Alternatives to Abortion Program services for the client situation described below. The vendor should provide a not-to-exceed total price with a price analysis for the client services identified in the narrative.

Jane Doe has recently learned that she is 12 weeks pregnant.

Jane is 24 years old and a high school graduate with no post-secondary education. Jane has three other children, ages 6, 4, and 18 months. The father of the new baby does not work, and Jane is unsure if he will stay involved once the baby arrives.

Jane works part time at a fast food restaurant making \$8 an hour, but she would someday like to become a nurse. Jane lives in a two bedroom apartment with her three children, but she struggles to pay rent each month. Jane has an old minivan which she uses to get to work, but it frequently breaks down. Jane has never applied for any public assistance programs.

Jane lives in a rural area, about 25 miles from the contractor's service location and has contacted your organization to access the Alternatives to Abortion Program Services and intends to continue with services until 12 months post-partum.

Narrative:

Jane Doe contacts the office (CCSOMO or WKO). Jane inquires about the ATA program and a Professional Case Manager visits with her over the phone explaining the program and asking questions to determine eligibility. Jane requests services and the Case Manager opens a client record in the state system and schedules an appointment for a meeting in her home since Jane's transportation is not reliable. It is confirmed that Jane is not receiving ATA services from another provider. Jane is asked to have available at the home visit: a form of identification; documentation of income and Missouri residency; and proof of pregnancy; to determine ATA eligibility. The Professional Case Manager (PCM) travels to meet with Jane in her home at the scheduled time. The PCM confirms eligibility and Jane signs a written consent for ATA Services and the client is admitted into the program. As part of the case management process the PCM evaluates if Jane is eligible for other programs including MO HealthNet Prenatal Case Management, Building Blocks of Missouri or Missouri Community-Based Home Visiting program. The Individual Risk and Needs Assessment (IRNA) and the Initial Client Assessment (ICA) are completed. As planned Jane is the only one present at this meeting with the PCM, so she is assessed for domestic violence. There is not a history but the household situation has changed since the father is not working. This was noted and will be monitored in the IPCP plan.

On the initial call Jane had stated that she had never applied for public assistance and that she struggles to pay rent. In anticipation that the IRNA would show a need for additional services for the family the PCM brought enrollment applications for SNAP and WIC and plans to assist the client with submitting applications for child care assistance and LIHEAP (utility assistance) as well. The PCM works with Jane to complete the SNAP and WIC applications and will submit via office fax. Jane is not eligible for health insurance at her fast food job so the PCM provides her with the enrollment information and the documents needed to apply for MO HealthNET and also suggests enrolling her three children in the program. If internet is available, the PCM will use her laptop to go on-line to <https://myddss.mo.gov> and assist in application process. Jane is given the 24/7 number to contact a case manager in the event of an emergency. A second meeting at Jane's home is scheduled within 10 days to develop the Individualized Pregnancy Care Plan (IPCP).

The PCM meets with Jane at her home within 10 days to complete the IPCP which lists Jane's goals and action steps over the next 18 months and incorporates the IRNA and ICA. This plan will be entered into the state system.

and will include services and also updates. The plan will be based on client's input and includes the initial plan as well as specific measurable objectives, urgent needs, strategies for client education, identification of necessary services and referrals, and outcome goals for referrals. Jane identifies her concerns: the father is not working and may not stay after the baby arrives; she struggles to pay rent each month; and her mini-van is unreliable and breaks down frequently. Jane also has three young children ages 6 and under.

The father is living in the home at this time and the PCM encourages offering paternity education to engage him in the fatherhood process. If he accepts, WKO will provide the education. Case Manager can provide resources for employment if requested by the father.

With three young children, the IPCP plan includes applying for childcare assistance from the Department of Social Services while Jane is in school and/or working 20 hours. Jane also states she often needs diapers, and will need a car seat for newborn.

When Jane begins receiving SNAP, WIC and LIHEAP benefits, the struggle to pay rent may be reduced. Jane will work with her Case Manager to develop a budget that evaluates all income including assistance and expenses. The Case Manager will also explore with Jane other housing options that might fit her situation. If over the 18 month program, Jane is unable to pay rent due to circumstances, other resources will be sought including rental assistance from the MHTF grant program, local community action agency or other housing assistance programs. ATA program will allow up to 3 months of rent assistance if needed.

There is no public transportation in this rural area, and the unreliability of Jane's mini-van keeps her from prenatal medical appointments and she also often misses work. Once she is on MO HealthNet, Medicaid transport can be arranged for medical appointments. Case Manager will work with other social service agencies, non-profits and churches to access funding for car repairs. If unable to attain funds then a request will be made to ATA under other services, for payment of vehicle repairs or auto loan (maximum \$400/month for 3 months in 12 month period) since transportation is part of her IPCP.

Once the immediate concerns have been addressed, Jane's goal to become a nurse can be incorporated into the IPCP, and the Case Manager contacts community or government agencies to obtain educational services for Jane. Since Jane will only qualify for reimbursement while an ATA client (18 months), Jane is considering attaining her CNA or LPN at the local community college and will later pursue her RN.

On subsequent home visits the Case Manager will provide Prenatal Education and Parenting Skills training, using evidence-based information. Jane shared that she had not received parent education and would benefit from the opportunity. At a minimum Jane will receive 30 minutes of training on each of the following topics: safe sleep for infants following the 2011 American Academy of Pediatric Recommendations; breastfeeding; importance of folic acid in the prevention of neural tube defects; use of substances during pregnancy including alcohol, tobacco, and other drugs; importance of prenatal care; immunizations; shaken baby syndrome; car seat safety; and nutrition and healthy eating. Additional topics may be added as well as others required in the RFP. A visit will include two topics (one hour of training) until all the required trainings are completed. Jane intends to remain in the program post-partum and will receive information on the importance of preconception and the advantages of birth spacing as it relates to the health of the mother and infant, and cognitive skills, motor skills, valuing and comforting the infant/child. Six to eight weeks post-partum, the PCM will conduct an assessment of Jane for post-partum depression using the Edinburgh post-partum depression screening scale.

During home visits and phone calls the Case Manager will continue to help identify Jane's areas of need and assist in problem solving as well as make referrals to community service providers. The Case Manager will meet with Jane at least every thirty days to review and discuss the IPCP until all the services and/or objectives in the plan have been completed or met, or Jane has been discharged from the ATA program. The Case Manager will continually assess Jane for domestic violence.

The Case Manager works with Jane to access services including financial literacy classes that will help her become more self-sufficient. The Case Manager will work with Jane to explore possible family support as well as potential church and community support. Referrals will be documented using tracking tools within the CaseWorthy software program as well as measuring referral outcomes.

Case Manager will continue to work with Jane through the provision of services, referrals, educational opportunities and the meeting of the goals and objectives in the IPCP. Visits may be as often as once a week or once a month depending on Jane's needs over the next 18 months including pregnancy and twelve months post-partum. The goals of achieving a positive and healthy birth outcome as well as self-sufficiency for Jane and her family were established in the original IPCP and updated and revised based on changing life situations and new challenges. This is Jane's plan and her goals and with the assistance of a trained case manager and access to resources and services, Jane has the opportunity to achieve them.

Total Price for Regions 8 & 9

1. Initial referral, intake and phone contact by Professional Case Manager/Nurse
\$70 X .5 hour = \$35.00
2. Initial home visit by Professional Case Manager/ Nurse (IRNA & ICA)
1.5 hour visit
1.25 hour round trip travel in rural areas (Client 25 miles away)
.5 hour documentation
\$70 X 3.25 hours = \$227.50
3. Home Visit by Professional Case Manager/Nurse (IPCP)
1.5 hour visit
1.25 hour round trip travel in rural areas (Client 25 miles away)
.5 hour documentation
\$70 X 3.25 hours = \$227.50
4. Case Manager/Outreach Specialist (monthly)
1 Hour visit
1.25 hour round trip travel time
.5 hour documentation
\$25 X 2.75=\$68.75
Jane will receive 18 months of service
\$68.75 X 18 months=\$1,237.50
5. Prenatal Education and Parenting skills (5 One on One)
1 hour visit (two education modules per visit)
1.25 hour round trip travel time
.25 hour documentation
\$25 hour X 2.5 hour=\$62.5
\$312.50
6. Non Face-to-Face Meetings over 18 months
\$25 X 2 Hours= \$50
\$50.00
7. Housing assistance (one month)
\$600.00
8. Transportation/other services
\$600.00
9. Education
\$100.00
10. Resources-diapers, pack n play, car seat

Total Fixed Price- Exhibit H client scenario needing services and resources \$3,790.00

If Jane needs more extensive services over the course of 18 months, the pricing could be higher. CCSOMO expects the not-to-exceed total price of \$4,000.

Region 7

CCSOMO operates LifeHouse Crisis Maternity Home (residential shelter) where a woman can enter at any time during her pregnancy and stay up to a year after delivery as she works towards self-sufficiency. Cost is \$100/day per client X 300 days = \$30,000 per client. LifeHouse averages 12 women and can house up to 20 women plus 30 infants and children under 5 years of age.

EXHIBIT I
PARTICIPATION COMMITMENT

Minority Business Enterprise/Women Business Enterprise (MBE/WBE) and/or Organization for the Blind/Sheltered Workshop and/or Service-Disabled Veteran Business Enterprise (SDVE) Participation Commitment – If the vendor is committing to participation by or if the vendor is a qualified MBE/WBE and/or organization for the blind/sheltered workshop and/or a qualified SDVE, the vendor must provide the required information in the appropriate table(s) below for the organization proposed and must submit the completed exhibit with the vendor's proposal.

For Minority Business Enterprise (MBE) and/or Woman Business Enterprise (WBE) Participation, if proposing an entity certified as both MBE and WBE, the vendor must either (1) enter the participation percentage under MBE or WBE, or must (2) divide the participation between both MBE and WBE. If dividing the participation, do not state the total participation on both the MBE and WBE Participation Commitment tables below. Instead, divide the total participation as proportionately appropriate between the tables below.

Place a check in the appropriate box below for the region proposed. There should only be **ONE** box checked. If proposing multiple regions, copy and complete this Participation Commitment Exhibit for each proposed region.

Region				
<input type="checkbox"/> Region 1	<input type="checkbox"/> Region 2	<input type="checkbox"/> Region 3	<input type="checkbox"/> Region 4	<input type="checkbox"/> Region 5
<input type="checkbox"/> Region 6	<input type="checkbox"/> Region 7	<input type="checkbox"/> Region 8	<input type="checkbox"/> Region 9	

MBE Participation Commitment Table		
(The services performed or the products provided by the listed MBE must provide a commercially useful function related to the delivery of the contractually-required service/product in a manner that will constitute an added value to the contract and shall be performed/provided exclusive to the performance of the contract.)		
Name of Each Qualified Minority Business Enterprise (MBE) Proposed	Committed Percentage of Participation for Each MBE (% of the Actual Total Contract Value)	Description of Products/Services to be Provided by Listed MBE <i>The vendor should also include the paragraph number(s) from the RFP which requires the product/service the MBE is proposed to perform and describe how the proposed product/service constitutes added value and will be exclusive to the contract.</i>
1.	%	Product/Service(s) proposed: ----- RFP Paragraph References:
2.	%	Product/Service(s) proposed: ----- RFP Paragraph References:
3.	%	Product/Service(s) proposed: ----- RFP Paragraph References:
4.	%	Product/Service(s) proposed: ----- RFP Paragraph References:
Total MBE Percentage:	%	

EXHIBIT I, continued

WBE Participation Commitment Table		
(The services performed or the products provided by the listed WBE must provide a commercially useful function related to the delivery of the contractually-required service/product in a manner that will constitute an added value to the contract and shall be performed/provided exclusive to the performance of the contract.)		
Name of Each Qualified Women Business Enterprise (WBE) proposed	Committed Percentage of Participation for Each WBE (% of the Actual Total Contract Value)	Description of Products/Services to be Provided by Listed WBE <i>The vendor should also include the paragraph number(s) from the RFP which requires the product/service the WBE is proposed to perform and describe how the proposed product/service constitutes added value and will be exclusive to the contract.</i>
1.	%	Product/Service(s) proposed: ----- RFP Paragraph References:
2.	%	Product/Service(s) proposed: ----- RFP Paragraph References:
3.	%	Product/Service(s) proposed: ----- RFP Paragraph References:
4.	%	Product/Service(s) proposed: ----- RFP Paragraph References:
Total WBE Percentage:	%	

Organization for the Blind/Sheltered Workshop Commitment Table	
By completing this table, the vendor commits to the use of the organization at the greater of \$5,000 or 2% of the actual total dollar value of contract.	
(The services performed or the products provided by the listed Organization for the Blind/Sheltered Workshop must provide a commercially useful function related to the delivery of the contractually-required service/product in a manner that will constitute an added value to the contract and shall be performed/provided exclusive to the performance of the contract.)	
Name of Organization for the Blind or Sheltered Workshop Proposed	Description of Products/Services to be Provided by Listed Organization for the Blind/Sheltered Workshop <i>The vendor should also include the paragraph number(s) from the RFP which requires the product/service the organization for the blind/sheltered workshop is proposed to perform and describe how the proposed product/service constitutes added value and will be exclusive to the contract.</i>
1.	Product/Service(s) proposed: ----- RFP Paragraph References:
2.	Product/Service(s) proposed: ----- RFP Paragraph References:

EXHIBIT I, continued

SDVE Participation Commitment Table		
(The services performed or the products provided by the listed SDVE must provide a commercially useful function related to the delivery of the contractually-required service/product in a manner that will constitute an added value to the contract and shall be performed/provided exclusive to the performance of the contract.)		
Name of Each Qualified Service-Disabled Veteran Business Enterprise (SDVE) Proposed	Committed Percentage of Participation for Each SDVE (% of the Actual Total Contract Value)	Description of Products/Services to be Provided by Listed SDVE <i>The vendor should also include the paragraph number(s) from the RFP which requires the product/service the SDVE is proposed to perform and describe how the proposed product/service constitutes added value and will be exclusive to the contract.</i>
1.	%	Product/Service(s) proposed: ----- RFP Paragraph References:
2.	%	Product/Service(s) proposed: ----- RFP Paragraph References:
Total SDVE Percentage:	%	

EXHIBIT J**DOCUMENTATION OF INTENT TO PARTICIPATE**

If the vendor is proposing to include the participation of a Minority Business Enterprise/Women Business Enterprise (MBE/WBE) and/or Organization for the Blind/Sheltered Workshop and/or qualified Service-Disabled Veteran Business Enterprise (SDVE) in the provision of the products/services required in the RFP, the vendor must either provide a recently dated letter of intent, signed and dated no earlier than the RFP issuance date, from each organization documenting the following information, or complete and provide this Exhibit with the vendor's proposal.

Place a check in the appropriate box below for the region proposed. There should only be **ONE** box checked. If proposing multiple regions, copy and complete this Documentation of Intent to Participate form for each proposed region.

Region				
<input type="checkbox"/> Region 1	<input type="checkbox"/> Region 2	<input type="checkbox"/> Region 3	<input type="checkbox"/> Region 4	<input type="checkbox"/> Region 5
<input type="checkbox"/> Region 6	<input type="checkbox"/> Region 7	<input type="checkbox"/> Region 8	<input type="checkbox"/> Region 9	

~ Copy This Form For Each Organization Proposed ~

Vendor Name: _____

This Section To Be Completed by Participating Organization:

By completing and signing this form, the undersigned hereby confirms the intent of the named participating organization to provide the products/services identified herein for the vendor identified above.

Indicate appropriate business classification(s):

____ MBE ____ WBE ____ Organization for the Blind ____ Sheltered Workshop ____ SDVE

Name of Organization: _____

(Name of MBE, WBE, Organization for the Blind, Sheltered Workshop, or SDVE)

Contact Name: _____

Email: _____

Address (If SDVE, provide MO Address): _____

Phone #: _____

City: _____

Fax #: _____

State/Zip: _____

Certification # _____

SDVE's Website _____

Certification _____

(or attach copy of certification)

Address: _____

Expiration Date: _____

Service-Disabled _____

SDV's Signature: _____

Veteran's (SDV) Name: _____

(Please Print)

PRODUCTS/SERVICES PARTICIPATING ORGANIZATION AGREED TO PROVIDE

Describe the products/services you (as the participating organization) have agreed to provide:

Authorized Signature:

 Authorized Signature of Participating Organization
 (MBE, WBE, Organization for the Blind, Sheltered Workshop, or SDVE)

 Date
 (Dated no earlier than the RFP
 issuance date)

EXHIBIT J, continued**DOCUMENTATION OF INTENT TO PARTICIPATE****SERVICE-DISABLED VETERAN BUSINESS ENTERPRISE (SDVE)**

If a participating organization is an SDVE, unless the Service-Disabled Veteran (SDV) documents were previously submitted within the past five (5) years to the Division of Purchasing (Purchasing), the vendor **must** provide the following SDV documents:

- a copy of the SDV's award letter from the Department of Veterans Affairs or a copy of the SDV's discharge paper (DD Form 214, Certificate of Release or Discharge from Active Duty), AND
- a copy of the SDV's documentation certifying disability by the appropriate federal agency responsible for the administration of veterans' affairs.

(NOTE: The SDV's award letter, the SDV's discharge paper, and the SDV's documentation certifying disability shall be considered confidential pursuant to subsection 14 of section 610.021, RSMo.)

The vendor should check the appropriate statement below and, if applicable, provide the requested information.

- ☐ No, I have not previously submitted the SDV documents specified above to the Purchasing and therefore have enclosed the SDV documents.
- ☐ Yes, I previously submitted the SDV documents specified above within the past five (5) years to the Purchasing.

Date SDV Documents were Submitted: _____

Previous **Proposal/Contract** Number for Which the SDV Documents were Submitted:
(if applicable and known)

(NOTE: If the proposed SDVE and SDV are listed on the Purchasing SDVE database located at <http://content.oa.mo.gov/sites/default/files/sdvelisting.pdf>, then the SDV documents have been submitted to the Purchasing within the past five [5] years. However, if it has been determined that an SDVE at any time no longer meets the requirements stated above, the Purchasing will remove the SDVE and associated SDV from the database.)

FOR STATE USE ONLY

SDV Documents - Verification Completed By:

Buyer

Date

EXHIBIT K**BUSINESS ENTITY CERTIFICATION, ENROLLMENT DOCUMENTATION,
AND AFFIDAVIT OF WORK AUTHORIZATION****BUSINESS ENTITY CERTIFICATION:**

The vendor must certify their current business status by completing either Box A or Box B or Box C on this Exhibit.

- BOX A:** To be completed by a non-business entity as defined below.
- BOX B:** To be completed by a business entity who has not yet completed and submitted documentation pertaining to the federal work authorization program as described at <http://www.uscis.gov/e-verify>.
- BOX C:** To be completed by a business entity who has current work authorization documentation on file with a Missouri state agency including Division of Purchasing.

Business entity, as defined in section 285.525, RSMo, pertaining to section 285.530, RSMo, is any person or group of persons performing or engaging in any activity, enterprise, profession, or occupation for gain, benefit, advantage, or livelihood. The term "**business entity**" shall include but not be limited to self-employed individuals, partnerships, corporations, contractors, and subcontractors. The term "**business entity**" shall include any business entity that possesses a business permit, license, or tax certificate issued by the state, any business entity that is exempt by law from obtaining such a business permit, and any business entity that is operating unlawfully without such a business permit. The term "**business entity**" shall not include a self-employed individual with no employees or entities utilizing the services of direct sellers as defined in subdivision (17) of subsection 12 of section 288.034, RSMo.

Note: Regarding governmental entities, business entity includes Missouri schools, Missouri universities (other than stated in Box C), out of state agencies, out of state schools, out of state universities, and political subdivisions. A business entity does not include Missouri state agencies and federal government entities.

(Complete the following if you have the E-Verify documentation and a current Affidavit of Work Authorization already on file with the State of Missouri. If completing Box C, do not complete Box B.)

BOX C – AFFIDAVIT ON FILE – CURRENT BUSINESS ENTITY STATUS

I certify that Catholic Charities of Southern Missouri, Inc. (Business Entity Name) **MEETS** the definition of a business entity as defined in section 285.525, RSMo pertaining to section 285.530, RSMo and have enrolled and currently participates in the E-Verify federal work authorization program with respect to the employees hired after enrollment in the program who are proposed to work in connection with the services related to contract(s) with the State of Missouri. We have previously provided documentation to a Missouri state agency or public university that affirms enrollment and participation in the E-Verify federal work authorization program. The documentation that was previously provided included the following.

- ✓ The E-Verify Employment Eligibility Verification page OR a page from the E-Verify Memorandum of Understanding (MOU) listing the vendor's name and the MOU signature page completed and signed by the vendor and the Department of Homeland Security – Verification Division
- ✓ A current, notarized Affidavit of Work Authorization (must be completed, signed, and notarized within the past twelve months):

Name of Missouri State Agency or Public University* to Which Previous E-Verify Documentation Submitted: _____

(*Public University includes the following five schools under chapter 34, RSMo: Harris-Stowe State University – St. Louis; Missouri Southern State University – Joplin; Missouri Western State University – St. Joseph; Northwest Missouri State University – Maryville; Southeast Missouri State University – Cape Girardeau.)

Date of Previous E-Verify Documentation Submission: 3/15/2012

Previous Bid/Contract Number for Which Previous E-Verify Documentation Submitted: B3Z12062 (if known)

Maura Taylor, Executive Director
Authorized Business Entity Representative's
Name (Please Print)


Authorized Business Entity
Representative's Signature

Catholic Charities of Southern Missouri, Inc.
Business Entity Name

3/25/2016
Date

mtaylor@ccsomo.org
E-Mail Address

521080
E-Verify MOU Company ID Number

FOR STATE OF MISSOURI USE ONLY

Documentation Verification Completed By:

Buyer

Date



Company ID Number: 521080

THE E-VERIFY PROGRAM FOR EMPLOYMENT VERIFICATION
MEMORANDUM OF UNDERSTANDING

ARTICLE I

PURPOSE AND AUTHORITY

This Memorandum of Understanding (MOU) sets forth the points of agreement between the Department of Homeland Security (DHS) and Catholic Charities of Southern Missouri (Employer) regarding the Employer's participation in the Employment Eligibility Verification Program (E-Verify). This MOU explains certain features of the E-Verify program and enumerates specific responsibilities of DHS, the Social Security Administration (SSA), and the Employer. E-Verify is a program that electronically confirms an employee's eligibility to work in the United States after completion of the Employment Eligibility Verification Form (Form I-9). For covered government contractors, E-Verify is used to verify the employment eligibility of all newly hired employees and all existing employees assigned to Federal contracts or to verify the entire workforce if the contractor so chooses.

Authority for the E-Verify program is found in Title IV, Subtitle A, of the Illegal Immigration Reform and Immigrant Responsibility Act of 1996 (IIRIRA), Pub. L. 104-208, 110 Stat. 3009, as amended (8 U.S.C. § 1324a note). Authority for use of the E-Verify program by Federal contractors and subcontractors covered by the terms of Subpart 22.18, "Employment Eligibility Verification", of the Federal Acquisition Regulation (FAR) (hereinafter referred to in this MOU as a "Federal contractor with the FAR E-Verify clause") to verify the employment eligibility of certain employees working on Federal contracts is also found in Subpart 22.18 and in Executive Order 12989, as amended.

ARTICLE II

FUNCTIONS TO BE PERFORMED

A. RESPONSIBILITIES OF SSA

1. SSA agrees to provide the Employer with available information that allows the Employer to confirm the accuracy of Social Security Numbers provided by all employees verified under this MOU and the employment authorization of U.S. citizens.
2. SSA agrees to provide to the Employer appropriate assistance with operational problems that may arise during the Employer's participation in the E-Verify program. SSA agrees to provide the Employer with names, titles, addresses, and telephone numbers of SSA representatives to be contacted during the E-Verify process.
3. SSA agrees to safeguard the information provided by the Employer through the E-Verify program procedures, and to limit access to such information, as is appropriate by law, to individuals responsible for the verification of Social Security Numbers and for evaluation of the E-Verify program or such other persons or entities who may be authorized by SSA as governed

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by the Privacy Act (5 U.S.C. § 552a), the Social Security Act (42 U.S.C. 1306(a)), and SSA regulations (20 CFR Part 401).

4. SSA agrees to provide a means of automated verification that is designed (in conjunction with DHS's automated system if necessary) to provide confirmation or tentative nonconfirmation of U.S. citizens' employment eligibility within 3 Federal Government work days of the initial inquiry.

5. SSA agrees to provide a means of secondary verification (including updating SSA records as may be necessary) for employees who contest SSA tentative nonconfirmations that is designed to provide final confirmation or nonconfirmation of U.S. citizens' employment eligibility and accuracy of SSA records for both citizens and non-citizens within 10 Federal Government work days of the date of referral to SSA, unless SSA determines that more than 10 days may be necessary. In such cases, SSA will provide additional verification instructions.

B. RESPONSIBILITIES OF DHS

1. After SSA verifies the accuracy of SSA records for employees through E-Verify, DHS agrees to provide the Employer access to selected data from DHS's database to enable the Employer to conduct, to the extent authorized by this MOU:

- Automated verification checks on employees by electronic means, and
- Photo verification checks (when available) on employees.

2. DHS agrees to provide to the Employer appropriate assistance with operational problems that may arise during the Employer's participation in the E-Verify program. DHS agrees to provide the Employer names, titles, addresses, and telephone numbers of DHS representatives to be contacted during the E-Verify process.

3. DHS agrees to make available to the Employer at the E-Verify Web site and on the E-Verify Web browser, instructional materials on E-Verify policies, procedures and requirements for both SSA and DHS, including restrictions on the use of E-Verify. DHS agrees to provide training materials on E-Verify.

4. DHS agrees to provide to the Employer a notice, which indicates the Employer's participation in the E-Verify program. DHS also agrees to provide to the Employer anti-discrimination notices issued by the Office of Special Counsel for Immigration-Related Unfair Employment Practices (OSC), Civil Rights Division, U.S. Department of Justice.

5. DHS agrees to issue the Employer a user identification number and password that permits the Employer to verify information provided by employees with DHS's database.

6. DHS agrees to safeguard the information provided to DHS by the Employer, and to limit access to such information to individuals responsible for the verification of employees' employment eligibility and for evaluation of the E-Verify program, or to such other persons or entities as may be authorized by applicable law. Information will be used only to verify the accuracy of Social Security Numbers and employment eligibility, to enforce the Immigration and



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Nationality Act (INA) and Federal criminal laws, and to administer Federal contracting requirements.

7. DHS agrees to provide a means of automated verification that is designed (in conjunction with SSA verification procedures) to provide confirmation or tentative nonconfirmation of employees' employment eligibility within 3 Federal Government work days of the initial inquiry.

8. DHS agrees to provide a means of secondary verification (including updating DHS records as may be necessary) for employees who contest DHS tentative nonconfirmations and photo non-match tentative nonconfirmations that is designed to provide final confirmation or nonconfirmation of the employees' employment eligibility within 10 Federal Government work days of the date of referral to DHS, unless DHS determines that more than 10 days may be necessary. In such cases, DHS will provide additional verification instructions.

C. RESPONSIBILITIES OF THE EMPLOYER

1. The Employer agrees to display the notices supplied by DHS in a prominent place that is clearly visible to prospective employees and all employees who are to be verified through the system.

2. The Employer agrees to provide to the SSA and DHS the names, titles, addresses, and telephone numbers of the Employer representatives to be contacted regarding E-Verify.

3. The Employer agrees to become familiar with and comply with the most recent version of the E-Verify User Manual.

4. The Employer agrees that any Employer Representative who will perform employment verification queries will complete the E-Verify Tutorial before that individual initiates any queries.

A. The Employer agrees that all Employer representatives will take the refresher tutorials initiated by the E-Verify program as a condition of continued use of E-Verify.

B. Failure to complete a refresher tutorial will prevent the Employer from continued use of the program.

5. The Employer agrees to comply with current Form I-9 procedures, with two exceptions:

- If an employee presents a "List B" identity document, the Employer agrees to only accept "List B" documents that contain a photo. (List B documents identified in 8 C.F.R. § 274a.2(b)(1)(B)) can be presented during the Form I-9 process to establish identity.) If an employee objects to the photo requirement for religious reasons, the Employer should contact E-Verify at 888-464-4218.

- If an employee presents a DHS Form I-551 (Permanent Resident Card) or Form I-766 (Employment Authorization Document) to complete the Form I-9, the Employer agrees to make a photocopy of the document and to retain the photocopy with the employee's Form I-9. The photocopy must be of sufficient quality to allow for verification of the photo

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and written information. The employer will use the photocopy to verify the photo and to assist DHS with its review of photo non-matches that are contested by employees. Note that employees retain the right to present any List A, or List B and List C, documentation to complete the Form I-9. DHS may in the future designate other documents that activate the photo screening tool.

6. The Employer understands that participation in E-Verify does not exempt the Employer from the responsibility to complete, retain, and make available for inspection Forms I-9 that relate to its employees, or from other requirements of applicable regulations or laws, including the obligation to comply with the antidiscrimination requirements of section 274B of the INA with respect to Form I-9 procedures, except for the following modified requirements applicable by reason of the Employer's participation in E-Verify: (1) identity documents must have photos, as described in paragraph 5 above; (2) a rebuttable presumption is established that the Employer has not violated section 274A(a)(1)(A) of the Immigration and Nationality Act (INA) with respect to the hiring of any individual if it obtains confirmation of the identity and employment eligibility of the individual in good faith compliance with the terms and conditions of E-Verify; (3) the Employer must notify DHS if it continues to employ any employee after receiving a final nonconfirmation, and is subject to a civil money penalty between \$550 and \$1,100 for each failure to notify DHS of continued employment following a final nonconfirmation; (4) the Employer is subject to a rebuttable presumption that it has knowingly employed an unauthorized alien in violation of section 274A(a)(1)(A) if the Employer continues to employ an employee after receiving a final nonconfirmation; and (5) no person or entity participating in E-Verify is civilly or criminally liable under any law for any action taken in good faith based on information provided through the confirmation system. DHS reserves the right to conduct Form I-9 and E-Verify system compliance inspections during the course of E-Verify, as well as to conduct any other enforcement activity authorized by law.

7. The Employer agrees to initiate E-Verify verification procedures for new employees within 3 Employer business days after each employee has been hired (but after the Form I-9 has been completed), and to complete as many (but only as many) steps of the E-Verify process as are necessary according to the E-Verify User Manual, or in the case of Federal contractors with the FAR E-Verify clause, the E-Verify User Manual for Federal Contractors. The Employer is prohibited from initiating verification procedures before the employee has been hired and the Form I-9 completed. If the automated system to be queried is temporarily unavailable, the 3-day time period is extended until it is again operational in order to accommodate the Employer's attempting, in good faith, to make inquiries during the period of unavailability. Employers may initiate verification by notating the Form I-9 in circumstances where the employee has applied for a Social Security Number (SSN) from the SSA and is waiting to receive the SSN, provided that the Employer performs an E-Verify employment verification query using the employee's SSN as soon as the SSN becomes available.

8. The Employer agrees not to use E-Verify procedures for pre-employment screening of job applicants, in support of any unlawful employment practice, or for any other use not authorized by this MOU. Employers must use E-Verify for all new employees, unless an Employer is a Federal contractor that qualifies for the exceptions described in Article II.D.1.c. Except as provided in Article II.D, the Employer will not verify selectively and will not verify employees hired before the effective date of this MOU. The Employer understands that if the Employer



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uses the E-Verify system for any purpose other than as authorized by this MOU, the Employer may be subject to appropriate legal action and termination of its access to SSA and DHS information pursuant to this MOU.

9. The Employer agrees to follow appropriate procedures (see Article III. below) regarding tentative nonconfirmations, including notifying employees in private of the finding and providing them written notice of the findings, providing written referral instructions to employees, allowing employees to contest the finding, and not taking adverse action against employees if they choose to contest the finding. Further, when employees contest a tentative nonconfirmation based upon a photo non-match, the Employer is required to take affirmative steps (see Article III.B. below) to contact DHS with information necessary to resolve the challenge.

10. The Employer agrees not to take any adverse action against an employee based upon the employee's perceived employment eligibility status while SSA or DHS is processing the verification request unless the Employer obtains knowledge (as defined in 8 C.F.R. § 274a.1(l)) that the employee is not work authorized. The Employer understands that an initial inability of the SSA or DHS automated verification system to verify work authorization, a tentative nonconfirmation, a case in continuance (indicating the need for additional time for the government to resolve a case), or the finding of a photo non-match, does not establish, and should not be interpreted as evidence, that the employee is not work authorized. In any of the cases listed above, the employee must be provided a full and fair opportunity to contest the finding, and if he or she does so, the employee may not be terminated or suffer any adverse employment consequences based upon the employee's perceived employment eligibility status (including denying, reducing, or extending work hours, delaying or preventing training, requiring an employee to work in poorer conditions, refusing to assign the employee to a Federal contract or other assignment, or otherwise subjecting an employee to any assumption that he or she is unauthorized to work) until and unless secondary verification by SSA or DHS has been completed and a final nonconfirmation has been issued. If the employee does not choose to contest a tentative nonconfirmation or a photo non-match or if a secondary verification is completed and a final nonconfirmation is issued, then the Employer can find the employee is not work authorized and terminate the employee's employment. Employers or employees with questions about a final nonconfirmation may call E-Verify at 1-888-464-4218 or OSC at 1-800-255-8155 or 1-800-237-2515 (TDD).

11. The Employer agrees to comply with Title VII of the Civil Rights Act of 1964 and section 274B of the INA, as applicable, by not discriminating unlawfully against any individual in hiring, firing, or recruitment or referral practices because of his or her national origin or, in the case of a protected individual as defined in section 274B(a)(3) of the INA, because of his or her citizenship status. The Employer understands that such illegal practices can include selective verification or use of E-Verify except as provided in part D below, or discharging or refusing to hire employees because they appear or sound "foreign" or have received tentative nonconfirmations. The Employer further understands that any violation of the unfair immigration-related employment practices provisions in section 274B of the INA could subject the Employer to civil penalties, back pay awards, and other sanctions, and violations of Title VII could subject the Employer to back pay awards, compensatory and punitive damages. Violations of either section 274B of the INA or Title VII may also lead to the termination of its participation in E-



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Verify. If the Employer has any questions relating to the anti-discrimination provision, it should contact OSC at 1-800-255-8155 or 1-800-237-2515 (TDD).

12. The Employer agrees to record the case verification number on the employee's Form I-9 or to print the screen containing the case verification number and attach it to the employee's Form I-9.

13. The Employer agrees that it will use the information it receives from SSA or DHS pursuant to E-Verify and this MOU only to confirm the employment eligibility of employees as authorized by this MOU. The Employer agrees that it will safeguard this information, and means of access to it (such as PINS and passwords) to ensure that it is not used for any other purpose and as necessary to protect its confidentiality, including ensuring that it is not disseminated to any person other than employees of the Employer who are authorized to perform the Employer's responsibilities under this MOU, except for such dissemination as may be authorized in advance by SSA or DHS for legitimate purposes.

14. The Employer acknowledges that the information which it receives from SSA is governed by the Privacy Act (5 U.S.C. § 552a(i)(1) and (3)) and the Social Security Act (42 U.S.C. 1306(a)), and that any person who obtains this information under false pretenses or uses it for any purpose other than as provided for in this MOU may be subject to criminal penalties.

15. The Employer agrees to cooperate with DHS and SSA in their compliance monitoring and evaluation of E-Verify, including by permitting DHS and SSA, upon reasonable notice, to review Forms I-9 and other employment records and to interview it and its employees regarding the Employer's use of E-Verify, and to respond in a timely and accurate manner to DHS requests for information relating to their participation in E-Verify.

D. RESPONSIBILITIES OF FEDERAL CONTRACTORS WITH THE FAR E-VERIFY CLAUSE

1. The Employer understands that if it is a subject to the employment verification terms in Subpart 22.18 of the FAR, it must verify the employment eligibility of any existing employee assigned to the contract and all new hires, as discussed in the Supplemental Guide for Federal Contractors. Once an employee has been verified through E-Verify by the Employer, the Employer may not reverify the employee through E-Verify.

a. Federal contractors with the FAR E-Verify clause agree to become familiar with and comply with the most recent versions of the E-Verify User Manual for Federal Contractors and the E-Verify Supplemental Guide for Federal Contractors.

b. Federal contractors with the FAR E-Verify clause agree to complete a tutorial for Federal contractors with the FAR E-Verify clause.

c. Federal contractors with the FAR E-Verify clause not enrolled at the time of contract award: An Employer that is not enrolled in E-Verify at the time of a contract award must enroll as a Federal contractor with the FAR E-Verify clause in E-Verify within 30 calendar days of contract award and, within 90 days of enrollment, begin to use E-Verify to initiate verification of employment eligibility of new hires of the Employer who are working in the United States,



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whether or not assigned to the contract. Once the Employer begins verifying new hires, such verification of new hires must be initiated within 3 business days after the date of hire. Once enrolled in E-Verify as a Federal contractor with the FAR E-Verify clause, the Employer must initiate verification of employees assigned to the contract within 90 calendar days from the time of enrollment in the system and after the date and selecting which employees will be verified in E-Verify or within 30 days of an employee's assignment to the contract, whichever date is later.

d. Employers that are already enrolled in E-Verify at the time of a contract award but are not enrolled in the system as a Federal contractor with the FAR E-Verify clause: Employers enrolled in E-Verify for 90 days or more at the time of a contract award must use E-Verify to initiate verification of employment eligibility for new hires of the Employer who are working in the United States, whether or not assigned to the contract, within 3 business days after the date of hire. Employers enrolled in E-Verify as other than a Federal contractor with the FAR E-Verify clause, must update E-Verify to indicate that they are a Federal contractor with the FAR E-Verify clause within 30 days after assignment to the contract. If the Employer is enrolled in E-Verify for 90 calendar days or less at the time of contract award, the Employer must, within 90 days of enrollment, begin to use E-Verify to initiate verification of new hires of the contractor who are working in the United States, whether or not assigned to the contract. Such verification of new hires must be initiated within 3 business days after the date of hire. An Employer enrolled as a Federal contractor with the FAR E-Verify clause in E-Verify must initiate verification of each employee assigned to the contract within 90 calendar days after date of contract award or within 30 days after assignment to the contract, whichever is later.

e. Institutions of higher education, State, local and tribal governments and sureties: Federal contractors with the FAR E-Verify clause that are institutions of higher education (as defined at 20 U.S.C. 1001(a)), State or local governments, governments of Federally recognized Indian tribes, or sureties performing under a takeover agreement entered into with a Federal agency pursuant to a performance bond may choose to only verify new and existing employees assigned to the Federal contract. Such Federal contractors with the FAR E-Verify clause may, however, elect to verify all new hires, and/or all existing employees hired after November 6, 1986. The provisions of Article II.D, paragraphs 1.a and 1.b of this MOU providing timeframes for initiating employment verification of employees assigned to a contract apply to such institutions of higher education, State, local and tribal governments, and sureties.

f. Verification of all employees: Upon enrollment, Employers who are Federal contractors with the FAR E-Verify clause may elect to verify employment eligibility of all existing employees working in the United States who were hired after November 6, 1986, instead of verifying only new employees and those existing employees assigned to a covered Federal contract. After enrollment, Employers must elect to do so only in the manner designated by DHS and initiate E-Verify verification of all existing employees within 180 days after the election.

g. Form I-9 procedures for existing employees of Federal contractors with the FAR E-Verify clause: Federal contractors with the FAR E-Verify clause may choose to complete new Forms I-9 for all existing employees other than those that are completely exempt from this process. Federal contractors with the FAR E-Verify clause may also update previously completed Forms I-9 to initiate E-Verify verification of existing employees who are not completely exempt as long as that Form I-9 is complete (including the SSN), complies with



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Article II.C.5, the employee's work authorization has not expired, and the Employer has reviewed the information reflected in the Form I-9 either in person or in communications with the employee to ensure that the employee's stated basis in section 1 of the Form I-9 for work authorization has not changed (including, but not limited to, a lawful permanent resident alien having become a naturalized U.S. citizen). If the Employer is unable to determine that the Form I-9 complies with Article II.C.5, if the employee's basis for work authorization as attested in section 1 has expired or changed, or if the Form I-9 contains no SSN or is otherwise incomplete, the Employer shall complete a new I-9 consistent with Article II.C.5, or update the previous I-9 to provide the necessary information. If section 1 of the Form I-9 is otherwise valid and up-to-date and the form otherwise complies with Article II.C.5, but reflects documentation (such as a U.S. passport or Form I-551) that expired subsequent to completion of the Form I-9, the Employer shall not require the production of additional documentation, or use the photo screening tool described in Article II.C.5, subject to any additional or superseding instructions that may be provided on this subject in the Supplemental Guide for Federal Contractors. Nothing in this section shall be construed to require a second verification using E-Verify of any assigned employee who has previously been verified as a newly hired employee under this MOU, or to authorize verification of any existing employee by any Employer that is not a Federal contractor with the FAR E-Verify clause.

2. The Employer understands that if it is a Federal contractor with the FAR E-Verify clause, its compliance with this MOU is a performance requirement under the terms of the Federal contract or subcontract, and the Employer consents to the release of information relating to compliance with its verification responsibilities under this MOU to contracting officers or other officials authorized to review the Employer's compliance with Federal contracting requirements.

ARTICLE III

REFERRAL OF INDIVIDUALS TO SSA AND DHS

A. REFERRAL TO SSA

1. If the Employer receives a tentative nonconfirmation issued by SSA, the Employer must print the notice as directed by the E-Verify system and provide it to the employee so that the employee may determine whether he or she will contest the tentative nonconfirmation. The Employer must review the tentative nonconfirmation with the employee in private.

2. The Employer will refer employees to SSA field offices only as directed by the automated system based on a tentative nonconfirmation, and only after the Employer records the case verification number, reviews the input to detect any transaction errors, and determines that the employee contests the tentative nonconfirmation. The Employer will transmit the Social Security Number to SSA for verification again if this review indicates a need to do so. The Employer will determine whether the employee contests the tentative nonconfirmation as soon as possible after the Employer receives it.

3. If the employee contests an SSA tentative nonconfirmation, the Employer will provide the employee with a system-generated referral letter and instruct the employee to visit an SSA office within 8 Federal Government work days. SSA will electronically transmit the result of the referral to the Employer within 10 Federal Government work days of the referral unless it



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determines that more than 10 days is necessary. The Employer agrees to check the E-Verify system regularly for case updates.

4. The Employer agrees not to ask the employee to obtain a printout from the Social Security Number database (the Numident) or other written verification of the Social Security Number from the SSA.

B. REFERRAL TO DHS

1. If the Employer receives a tentative nonconfirmation issued by DHS, the Employer must print the tentative nonconfirmation notice as directed by the E-Verify system and provide it to the employee so that the employee may determine whether he or she will contest the tentative nonconfirmation. The Employer must review the tentative nonconfirmation with the employee in private.

2. If the Employer finds a photo non-match for an employee who provides a document for which the automated system has transmitted a photo, the employer must print the photo non-match tentative nonconfirmation notice as directed by the automated system and provide it to the employee so that the employee may determine whether he or she will contest the finding. The Employer must review the tentative nonconfirmation with the employee in private.

3. The Employer agrees to refer individuals to DHS only when the employee chooses to contest a tentative nonconfirmation received from DHS automated verification process or when the Employer issues a tentative nonconfirmation based upon a photo non-match. The Employer will determine whether the employee contests the tentative nonconfirmation as soon as possible after the Employer receives it.

4. If the employee contests a tentative nonconfirmation issued by DHS, the Employer will provide the employee with a referral letter and instruct the employee to contact DHS through its toll-free hotline (as found on the referral letter) within 8 Federal Government work days.

5. If the employee contests a tentative nonconfirmation based upon a photo non-match, the Employer will provide the employee with a referral letter to DHS. DHS will electronically transmit the result of the referral to the Employer within 10 Federal Government work days of the referral unless it determines that more than 10 days is necessary. The Employer agrees to check the E-Verify system regularly for case updates.

6. The Employer agrees that if an employee contests a tentative nonconfirmation based upon a photo non-match, the Employer will send a copy of the employee's Form I-551 or Form I-766 to DHS for review by:

- Scanning and uploading the document, or
- Sending a photocopy of the document by an express mail account (paid for at employer expense).

7. If the Employer determines that there is a photo non-match when comparing the photocopied List B document described in Article II.C.5 with the image generated in E-Verify, the Employer must forward the employee's documentation to DHS using one of the means described in the preceding paragraph, and allow DHS to resolve the case.



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ARTICLE IV

SERVICE PROVISIONS

SSA and DHS will not charge the Employer for verification services performed under this MOU. The Employer is responsible for providing equipment needed to make inquiries. To access E-Verify, an Employer will need a personal computer with Internet access.

ARTICLE V

PARTIES

A. This MOU is effective upon the signature of all parties, and shall continue in effect for as long as the SSA and DHS conduct the E-Verify program unless modified in writing by the mutual consent of all parties, or terminated by any party upon 30 days prior written notice to the others. Any and all system enhancements to the E-Verify program by DHS or SSA, including but not limited to the E-Verify checking against additional data sources and instituting new verification procedures, will be covered under this MOU and will not cause the need for a supplemental MOU that outlines these changes. DHS agrees to train employers on all changes made to E-Verify through the use of mandatory refresher tutorials and updates to the E-Verify User Manual, the E-Verify User Manual for Federal Contractors or the E-Verify Supplemental Guide for Federal Contractors. Even without changes to E-Verify, DHS reserves the right to require employers to take mandatory refresher tutorials. An Employer that is a Federal contractor with the FAR E-Verify clause may terminate this MOU when the Federal contract that requires its participation in E-Verify is terminated or completed. In such a circumstance, the Federal contractor with the FAR E-Verify clause must provide written notice to DHS. If an Employer that is a Federal contractor with the FAR E-Verify clause fails to provide such notice, that Employer will remain a participant in the E-Verify program, will remain bound by the terms of this MOU that apply to participants that are not Federal contractors with the FAR E-Verify clause, and will be required to use the E-Verify procedures to verify the employment eligibility of all newly hired employees.

B. Notwithstanding Article V, part A of this MOU, DHS may terminate this MOU if deemed necessary because of the requirements of law or policy, or upon a determination by SSA or DHS that there has been a breach of system integrity or security by the Employer, or a failure on the part of the Employer to comply with established procedures or legal requirements. The Employer understands that if it is a Federal contractor with the FAR E-Verify clause, termination of this MOU by any party for any reason may negatively affect its performance of its contractual responsibilities.

C. Some or all SSA and DHS responsibilities under this MOU may be performed by contractor(s), and SSA and DHS may adjust verification responsibilities between each other as they may determine necessary. By separate agreement with DHS, SSA has agreed to perform its responsibilities as described in this MOU.



Company ID Number: 521080

D. Nothing in this MOU is intended, or should be construed, to create any right or benefit, substantive or procedural, enforceable at law by any third party against the United States, its agencies, officers, or employees, or against the Employer, its agents, officers, or employees.

E. Each party shall be solely responsible for defending any claim or action against it arising out of or related to E-Verify or this MOU, whether civil or criminal, and for any liability wherefrom, including (but not limited to) any dispute between the Employer and any other person or entity regarding the applicability of Section 403(d) of IIRIRA to any action taken or allegedly taken by the Employer.

F. The Employer understands that the fact of its participation in E-Verify is not confidential information and may be disclosed as authorized or required by law and DHS or SSA policy, including but not limited to, Congressional oversight, E-Verify publicity and media inquiries, determinations of compliance with Federal contractual requirements, and responses to inquiries under the Freedom of Information Act (FOIA).

G. The foregoing constitutes the full agreement on this subject between DHS and the Employer.

H. The individuals whose signatures appear below represent that they are authorized to enter into this MOU on behalf of the Employer and DHS respectively.



Company ID Number: 521080

To be accepted as a participant in E-Verify, you should only sign the Employer's Section of the signature page. If you have any questions, contact E-Verify at 888-464-4218.

Employer Catholic Charities of Southern Missouri	
Greg Stark	
Name (Please Type or Print)	Title
Electronically Signed	03/15/2012
Signature	Date

Department of Homeland Security – Verification Division

USCIS Verification Division

Name (Please Type or Print)	Title
Electronically Signed	03/15/2012
Signature	Date

Information Required for the E-Verify Program

Information relating to your Company:

Company Name:	Catholic Charities of Southern Missouri
Company Facility Address:	601 S. Jefferson Ave
	Springfield, MO 65806
Company Alternate Address:	
County or Parish:	GREENE
Employer Identification Number:	80045589

E-Verify



Company ID Number: 521080

North American Industry Classification Systems Code:	624
Administrator:	
Number of Employees:	10 to 19
Number of Sites Verified for:	1
Are you verifying for more than 1 site? If yes, please provide the number of sites verified for in each State:	
• MISSOURI 1 site(s)	

Information relating to the Program Administrator(s) for your Company on policy questions or operational problems:

Name:	Greg W Stark	Fax Number:	(417) 866 - 1140
Telephone Number:	(417) 866 - 0841 ext. 125		
E-mail Address:	gstark@ccsomo.org		

RFPS30034901600477

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EXHIBIT K, continued

(Complete the following if you have the E-Verify documentation and a current Affidavit of Work Authorization already on file with the State of Missouri. If completing Box C, do not complete Box B.)

BOX C AFFIDAVIT ON FILE - CURRENT BUSINESS ENTITY STATUS

I certify that Whole Kids Outreach (Business Entity Name) **MEETS** the definition of a business entity as defined in section 285.525, RSMo pertaining to section 285.530, RSMo and have enrolled and currently participates in the E-Verify federal work authorization program with respect to the employees hired after enrollment in the program who are proposed to work in connection with the services related to contract(s) with the State of Missouri. We have previously provided documentation to a Missouri state agency or public university that affirms enrollment and participation in the E-Verify federal work authorization program. The documentation that was previously provided included the following:

- ✓ The E-Verify Employment Eligibility Verification page OR a page from the E-Verify Memorandum of Understanding (MOU) listing the vendor's name and the MOU signature page completed and signed by the vendor and the Department of Homeland Security - Verification Division
- ✓ A current, notarized Affidavit of Work Authorization (must be completed, signed, and notarized within the past twelve months).

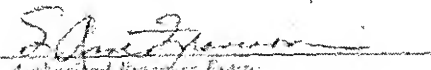
Name of Missouri State Agency or Public University* to Which Previous E-Verify Documentation Submitted: _____

(*Public University includes the following five schools under chapter 34, RSMo: Harris-Stowe State University - St. Louis; Missouri Southern State University - Joplin; Missouri Western State University - St. Joseph; Northwest Missouri State University - Maryville; Southeast Missouri State University - Cape Girardeau.)

Date of Previous E-Verify Documentation Submission: _____

Previous Bid/Contract Number for Which Previous E-Verify Documentation Submitted: _____ (if known)

Sr. Anne Francioni
Authorized Business Entity Representative's
Name (Please Print)


Authorized Business Entity
Representative's Signature

Whole Kids Outreach
Business Entity Name

March 28, 2016
Date

sisteranne@wholekidsoutreach.org
E-Mail Address

43-1839370
E-Verify MOU Company ID Number

FOR STATE OF MISSOURI USE ONLY

Documentation Verification Completed By: _____

Buyer

Date



Company ID Number: 209296

THE E-VERIFY PROGRAM FOR EMPLOYMENT VERIFICATION MEMORANDUM OF UNDERSTANDING

ARTICLE I

PURPOSE AND AUTHORITY

This Memorandum of Understanding (MOU) sets forth the points of agreement between the Department of Homeland Security (DHS) and **Whole Kids Outreach** (Employer) regarding the Employer's participation in the Employment Eligibility Verification Program (E-Verify). This MOU explains certain features of the E-Verify program and enumerates specific responsibilities of DHS, the Social Security Administration (SSA), and the Employer. E-Verify is a program that electronically confirms an employee's eligibility to work in the United States after completion of the Employment Eligibility Verification Form (Form I-9). For covered government contractors, E-Verify is used to verify the employment eligibility of all newly hired employees and all existing employees assigned to Federal contracts.

Authority for the E-Verify program is found in Title IV, Subtitle A, of the Illegal Immigration Reform and Immigrant Responsibility Act of 1996 (IIRIRA), Pub. L. 104-208, 110 Stat. 3009, as amended (8 U.S.C. § 1324a note). Authority for use of the E-Verify program by Federal contractors and subcontractors covered by the terms of Subpart 22.18, "Employment Eligibility Verification", of the Federal Acquisition Regulation (FAR) (hereinafter referred to in this MOU as a "Federal contractor") to verify the employment eligibility of certain employees working on Federal contracts is also found in Subpart 22.18 and in Executive Order 12989, as amended.

ARTICLE II

FUNCTIONS TO BE PERFORMED

A. RESPONSIBILITIES OF SSA

1. SSA agrees to provide the Employer with available information that allows the Employer to confirm the accuracy of Social Security Numbers provided by all employees verified under this MOU and the employment authorization of U.S. citizens.
2. SSA agrees to provide to the Employer appropriate assistance with operational problems that may arise during the Employer's participation in the E-Verify program. SSA agrees to provide the Employer with names, titles, addresses, and telephone numbers of SSA representatives to be contacted during the E-Verify process.
3. SSA agrees to safeguard the information provided by the Employer through the E-Verify program procedures, and to limit access to such information, as is appropriate by law, to individuals responsible for the verification of Social Security Numbers and for evaluation of the E-Verify program or such other persons or entities who may be authorized by SSA as governed by the Privacy Act (5 U.S.C. § 552a), the Social Security Act (42 U.S.C. 1306(a)), and SSA regulations (20 CFR Part 401).



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4. SSA agrees to provide a means of automated verification that is designed (in conjunction with DHS's automated system if necessary) to provide confirmation or tentative nonconfirmation of U.S. citizens' employment eligibility within 3 Federal Government work days of the initial inquiry.

5. SSA agrees to provide a means of secondary verification (including updating SSA records as may be necessary) for employees who contest SSA tentative nonconfirmations that is designed to provide final confirmation or nonconfirmation of U.S. citizens' employment eligibility and accuracy of SSA records for both citizens and aliens within 10 Federal Government work days of the date of referral to SSA, unless SSA determines that more than 10 days may be necessary. In such cases, SSA will provide additional verification instructions.

B. RESPONSIBILITIES OF DHS

1. After SSA verifies the accuracy of SSA records for aliens through E-Verify, DHS agrees to provide the Employer access to selected data from DHS's database to enable the Employer to conduct, to the extent authorized by this MOU:

- Automated verification checks on alien employees by electronic means, and
- Photo verification checks (when available) on employees.

2. DHS agrees to provide to the Employer appropriate assistance with operational problems that may arise during the Employer's participation in the E-Verify program. DHS agrees to provide the Employer names, titles, addresses, and telephone numbers of DHS representatives to be contacted during the E-Verify process.

3. DHS agrees to provide to the Employer a manual (the E-Verify User Manual) containing instructions on E-Verify policies, procedures and requirements for both SSA and DHS, including restrictions on the use of E-Verify. DHS agrees to provide training materials on E-Verify.

4. DHS agrees to provide to the Employer a notice, which indicates the Employer's participation in the E-Verify program. DHS also agrees to provide to the Employer anti-discrimination notices issued by the Office of Special Counsel for Immigration-Related Unfair Employment Practices (OSC), Civil Rights Division, U.S. Department of Justice.

5. DHS agrees to issue the Employer a user identification number and password that permits the Employer to verify information provided by alien employees with DHS's database.

6. DHS agrees to safeguard the information provided to DHS by the Employer, and to limit access to such information to individuals responsible for the verification of alien employment eligibility and for evaluation of the E-Verify program, or to such other persons or entities as may be authorized by applicable law. Information will be used only to verify the accuracy of Social Security Numbers and employment eligibility, to enforce the Immigration and Nationality Act (INA) and Federal criminal laws, and to administer Federal contracting requirements.

7. DHS agrees to provide a means of automated verification that is designed (in conjunction with SSA verification procedures) to provide confirmation or tentative



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nonconfirmation of employees' employment eligibility within 3 Federal Government work days of the initial inquiry.

8. DHS agrees to provide a means of secondary verification (including updating DHS records as may be necessary) for employees who contest DHS tentative nonconfirmations and photo non-match tentative nonconfirmations that is designed to provide final confirmation or nonconfirmation of the employees' employment eligibility within 10 Federal Government work days of the date of referral to DHS, unless DHS determines that more than 10 days may be necessary. In such cases, DHS will provide additional verification instructions.

C. RESPONSIBILITIES OF THE EMPLOYER

1. The Employer agrees to display the notices supplied by DHS in a prominent place that is clearly visible to prospective employees and all employees who are to be verified through the system.

2. The Employer agrees to provide to the SSA and DHS the names, titles, addresses, and telephone numbers of the Employer representatives to be contacted regarding E-Verify.

3. The Employer agrees to become familiar with and comply with the most recent version of the E-Verify User Manual.

4. The Employer agrees that any Employer Representative who will perform employment verification queries will complete the E-Verify Tutorial before that individual initiates any queries.

A. The Employer agrees that all Employer representatives will take the refresher tutorials initiated by the E-Verify program as a condition of continued use of E-Verify, including any tutorials for Federal contractors if the Employer is a Federal contractor.

B. Failure to complete a refresher tutorial will prevent the Employer from continued use of the program.

5. The Employer agrees to comply with current Form I-9 procedures, with two exceptions:

- If an employee presents a "List B" identity document, the Employer agrees to only accept "List B" documents that contain a photo. (List B documents identified in 8 C.F.R. § 274a.2(b)(1)(B)) can be presented during the Form I-9 process to establish identity.) If an employee objects to the photo requirement for religious reasons, the Employer should contact E-Verify at 888-464-4218.
- If an employee presents a DHS Form I-551 (Permanent Resident Card) or Form I-766 (Employment Authorization Document) to complete the Form I-9, the Employer agrees to make a photocopy of the document and to retain the photocopy with the employee's Form I-9. The employer will use the photocopy to verify the photo and to assist DHS with its review of photo non-matches that are contested by employees. Note that employees retain the right to present any List A, or List B and List C, documentation to complete the Form I-9. DHS may in the future designate other documents that activate the photo screening tool.



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6. The Employer understands that participation in E-Verify does not exempt the Employer from the responsibility to complete, retain, and make available for inspection Forms I-9 that relate to its employees, or from other requirements of applicable regulations or laws, including the obligation to comply with the antidiscrimination requirements of section 274B of the INA with respect to Form I-9 procedures, except for the following modified requirements applicable by reason of the Employer's participation in E-Verify: (1) identity documents must have photos, as described in paragraph 5 above; (2) a rebuttable presumption is established that the Employer has not violated section 274A(a)(1)(A) of the Immigration and Nationality Act (INA) with respect to the hiring of any individual if it obtains confirmation of the identity and employment eligibility of the individual in compliance with the terms and conditions of E-Verify; (3) the Employer must notify DHS if it continues to employ any employee after receiving a final nonconfirmation, and is subject to a civil money penalty between \$550 and \$1,100 for each failure to notify DHS of continued employment following a final nonconfirmation; (4) the Employer is subject to a rebuttable presumption that it has knowingly employed an unauthorized alien in violation of section 274A(a)(1)(A) if the Employer continues to employ an employee after receiving a final nonconfirmation; and (5) no person or entity participating in E-Verify is civilly or criminally liable under any law for any action taken in good faith based on information provided through the confirmation system. DHS reserves the right to conduct Form I-9 compliance inspections during the course of E-Verify, as well as to conduct any other enforcement activity authorized by law.

7. The Employer agrees to initiate E-Verify verification procedures for new employees within 3 Employer business days after each employee has been hired (but after both sections 1 and 2 of the Form I-9 have been completed), and to complete as many (but only as many) steps of the E-Verify process as are necessary according to the E-Verify User Manual. The Employer is prohibited from initiating verification procedures before the employee has been hired and the Form I-9 completed. If the automated system to be queried is temporarily unavailable, the 3-day time period is extended until it is again operational in order to accommodate the Employer's attempting, in good faith, to make inquiries during the period of unavailability. In all cases, the Employer must use the SSA verification procedures first, and use DHS verification procedures and photo screening tool only after the SSA verification response has been given. Employers may initiate verification by notating the Form I-9 in circumstances where the employee has applied for a Social Security Number (SSN) from the SSA and is waiting to receive the SSN, provided that the Employer performs an E-Verify employment verification query using the employee's SSN as soon as the SSN becomes available.

8. The Employer agrees not to use E-Verify procedures for pre-employment screening of job applicants, in support of any unlawful employment practice, or for any other use not authorized by this MOU. Employers must use E-Verify for all new employees, unless an Employer is a Federal contractor that qualifies for the exceptions described in Article II.D.1.c. Except as provided in Article II.D, the Employer will not verify selectively and will not verify employees hired before the effective date of this MOU. The Employer understands that if the Employer uses E-Verify procedures for any purpose other than as authorized by this MOU, the Employer may be subject to appropriate legal action and termination of its access to SSA and DHS information pursuant to this MOU.

9. The Employer agrees to follow appropriate procedures (see Article III. below) regarding tentative nonconfirmations, including notifying employees of the finding, providing written referral instructions to employees, allowing employees to contest the finding, and not taking

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adverse action against employees if they choose to contest the finding. Further, when employees contest a tentative nonconfirmation based upon a photo non-match, the Employer is required to take affirmative steps (see Article III.B. below) to contact DHS with information necessary to resolve the challenge.

10. The Employer agrees not to take any adverse action against an employee based upon the employee's perceived employment eligibility status while SSA or DHS is processing the verification request unless the Employer obtains knowledge (as defined in 8 C.F.R. § 274a.1(l)) that the employee is not work authorized. The Employer understands that an initial inability of the SSA or DHS automated verification system to verify work authorization, a tentative nonconfirmation, a case in continuance (indicating the need for additional time for the government to resolve a case), or the finding of a photo non-match, does not establish, and should not be interpreted as evidence, that the employee is not work authorized. In any of the cases listed above, the employee must be provided a full and fair opportunity to contest the finding, and if he or she does so, the employee may not be terminated or suffer any adverse employment consequences based upon the employee's perceived employment eligibility status (including denying, reducing, or extending work hours, delaying or preventing training, requiring an employee to work in poorer conditions, refusing to assign the employee to a Federal contract or other assignment, or otherwise subjecting an employee to any assumption that he or she is unauthorized to work) until and unless secondary verification by SSA or DHS has been completed and a final nonconfirmation has been issued. If the employee does not choose to contest a tentative nonconfirmation or a photo non-match or if a secondary verification is completed and a final nonconfirmation is issued, then the Employer can find the employee is not work authorized and terminate the employee's employment. Employers or employees with questions about a final nonconfirmation may call E-Verify at 1-888-464-4218 or OSC at 1-800-255-8155 or 1-800-237-2515 (TDD).

11. The Employer agrees to comply with Title VII of the Civil Rights Act of 1964 and section 274B of the INA by not discriminating unlawfully against any individual in hiring, firing, or recruitment or referral practices because of his or her national origin or, in the case of a protected individual as defined in section 274B(a)(3) of the INA, because of his or her citizenship status. The Employer understands that such illegal practices can include selective verification or use of E-Verify except as provided in part D below, or discharging or refusing to hire employees because they appear or sound "foreign" or have received tentative nonconfirmations. The Employer further understands that any violation of the unfair immigration-related employment practices provisions in section 274B of the INA could subject the Employer to civil penalties, back pay awards, and other sanctions, and violations of Title VII could subject the Employer to back pay awards, compensatory and punitive damages. Violations of either section 274B of the INA or Title VII may also lead to the termination of its participation in E-Verify. If the Employer has any questions relating to the anti-discrimination provision, it should contact OSC at 1-800-255-8155 or 1-800-237-2515 (TDD).

12. The Employer agrees to record the case verification number on the employee's Form I-9 or to print the screen containing the case verification number and attach it to the employee's Form I-9.

13. The Employer agrees that it will use the information it receives from SSA or DHS pursuant to E-Verify and this MOU only to confirm the employment eligibility of employees as

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authorized by this MOU. The Employer agrees that it will safeguard this information, and means of access to it (such as PINS and passwords) to ensure that it is not used for any other purpose and as necessary to protect its confidentiality, including ensuring that it is not disseminated to any person other than employees of the Employer who are authorized to perform the Employer's responsibilities under this MOU, except for such dissemination as may be authorized in advance by SSA or DHS for legitimate purposes.

14. The Employer acknowledges that the information which it receives from SSA is governed by the Privacy Act (5 U.S.C. § 552a(i)(1) and (3)) and the Social Security Act (42 U.S.C. 1306(a)), and that any person who obtains this information under false pretenses or uses it for any purpose other than as provided for in this MOU may be subject to criminal penalties.

15. The Employer agrees to cooperate with DHS and SSA in their compliance monitoring and evaluation of E-Verify, including by permitting DHS and SSA, upon reasonable notice, to review Forms I-9 and other employment records and to interview it and its employees regarding the Employer's use of E-Verify, and to respond in a timely and accurate manner to DHS requests for information relating to their participation in E-Verify.

D. RESPONSIBILITIES OF FEDERAL CONTRACTORS

1. The Employer understands that if it is a Federal contractor subject to the employment verification terms in Subpart 22.18 of the FAR it must verify the employment eligibility of any "employee assigned to the contract" (as defined in FAR 22.1801) in addition to verifying the employment eligibility of all other employees required to be verified under the FAR. Once an employee has been verified through E-Verify by the Employer, the Employer may not reverify the employee through E-Verify.

a. Federal contractors not enrolled at the time of contract award: An Employer that is not enrolled in E-Verify as a Federal contractor at the time of a contract award must enroll as a Federal contractor in the E-Verify program within 30 calendar days of contract award and, within 90 days of enrollment, begin to use E-Verify to initiate verification of employment eligibility of new hires of the Employer who are working in the United States, whether or not assigned to the contract. Once the Employer begins verifying new hires, such verification of new hires must be initiated within 3 business days after the date of hire. Once enrolled in E-Verify as a Federal contractor, the Employer must initiate verification of employees assigned to the contract within 90 calendar days after the date of enrollment or within 30 days of an employee's assignment to the contract, whichever date is later.

b. Federal contractors already enrolled at the time of a contract award: Employers enrolled in E-Verify as a Federal contractor for 90 days or more at the time of a contract award must use E-Verify to initiate verification of employment eligibility for new hires of the Employer who are working in the United States, whether or not assigned to the contract, within 3 business days after the date of hire. If the Employer is enrolled in E-Verify as a Federal contractor for 90 calendar days or less at the time of contract award, the Employer must, within 90 days of enrollment, begin to use E-Verify to initiate verification of new hires of the contractor who are working in the United States, whether or not assigned to the contract. Such verification of new hires must be initiated within 3 business days after the date of hire. An Employer enrolled as a Federal contractor in E-Verify must initiate verification of each employee assigned to the

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contract within 90 calendar days after date of contract award or within 30 days after assignment to the contract, whichever is later.

c. Institutions of higher education, State, local and tribal governments and sureties: Federal contractors that are institutions of higher education (as defined at 20 U.S.C. 1001(a)), State or local governments, governments of Federally recognized Indian tribes, or sureties performing under a takeover agreement entered into with a Federal agency pursuant to a performance bond may choose to only verify new and existing employees assigned to the Federal contract. Such Federal contractors may, however, elect to verify all new hires, and/or all existing employees hired after November 6, 1986. The provisions of Article II.D, paragraphs 1.a and 1.b of this MOU providing timeframes for initiating employment verification of employees assigned to a contract apply to such institutions of higher education, State, local and tribal governments, and sureties.

d. Verification of all employees: Upon enrollment, Employers who are Federal contractors may elect to verify employment eligibility of all existing employees working in the United States who were hired after November 6, 1986, instead of verifying only those employees assigned to a covered Federal contract. After enrollment, Employers must elect to do so only in the manner designated by DHS and initiate E-Verify verification of all existing employees within 180 days after the election.

e. Form I-9 procedures for Federal contractors: The Employer may use a previously completed Form I-9 as the basis for initiating E-Verify verification of an employee assigned to a contract as long as that Form I-9 is complete (including the SSN), complies with Article II.C.5, the employee's work authorization has not expired, and the Employer has reviewed the information reflected in the Form I-9 either in person or in communications with the employee to ensure that the employee's stated basis in section 1 of the Form I-9 for work authorization has not changed (including, but not limited to, a lawful permanent resident alien having become a naturalized U.S. citizen). If the Employer is unable to determine that the Form I-9 complies with Article II.C.5, if the employee's basis for work authorization as attested in section 1 has expired or changed, or if the Form I-9 contains no SSN or is otherwise incomplete, the Employer shall complete a new I-9 consistent with Article II.C.5, or update the previous I-9 to provide the necessary information. If section 1 of the Form I-9 is otherwise valid and up-to-date and the form otherwise complies with Article II.C.5, but reflects documentation (such as a U.S. passport or Form I-551) that expired subsequent to completion of the Form I-9, the Employer shall not require the production of additional documentation, or use the photo screening tool described in Article II.C.5, subject to any additional or superseding instructions that may be provided on this subject in the E-Verify User Manual. Nothing in this section shall be construed to require a second verification using E-Verify of any assigned employee who has previously been verified as a newly hired employee under this MOU, or to authorize verification of any existing employee by any Employer that is not a Federal contractor.

2. The Employer understands that if it is a Federal contractor, its compliance with this MOU is a performance requirement under the terms of the Federal contract or subcontract, and the Employer consents to the release of information relating to compliance with its verification responsibilities under this MOU to contracting officers or other officials authorized to review the Employer's compliance with Federal contracting requirements.



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ARTICLE III

REFERRAL OF INDIVIDUALS TO SSA AND DHS

A. REFERRAL TO SSA

1. If the Employer receives a tentative nonconfirmation issued by SSA, the Employer must print the tentative nonconfirmation notice as directed by the automated system and provide it to the employee so that the employee may determine whether he or she will contest the tentative nonconfirmation.
2. The Employer will refer employees to SSA field offices only as directed by the automated system based on a tentative nonconfirmation, and only after the Employer records the case verification number, reviews the input to detect any transaction errors, and determines that the employee contests the tentative nonconfirmation. The Employer will transmit the Social Security Number to SSA for verification again if this review indicates a need to do so. The Employer will determine whether the employee contests the tentative nonconfirmation as soon as possible after the Employer receives it.
3. If the employee contests an SSA tentative nonconfirmation, the Employer will provide the employee with a system-generated referral letter and instruct the employee to visit an SSA office within 8 Federal Government work days. SSA will electronically transmit the result of the referral to the Employer within 10 Federal Government work days of the referral unless it determines that more than 10 days is necessary. The Employer agrees to check the E-Verify system regularly for case updates.
4. The Employer agrees not to ask the employee to obtain a printout from the Social Security Number database (the Numident) or other written verification of the Social Security Number from the SSA.

B. REFERRAL TO DHS

1. If the Employer receives a tentative nonconfirmation issued by DHS, the Employer must print the tentative nonconfirmation notice as directed by the automated system and provide it to the employee so that the employee may determine whether he or she will contest the tentative nonconfirmation.
2. If the Employer finds a photo non-match for an employee who provides a document for which the automated system has transmitted a photo, the employer must print the photo non-match tentative nonconfirmation notice as directed by the automated system and provide it to the employee so that the employee may determine whether he or she will contest the finding.
3. The Employer agrees to refer individuals to DHS only when the employee chooses to contest a tentative nonconfirmation received from DHS automated verification process or when the Employer issues a tentative nonconfirmation based upon a photo non-match. The Employer will determine whether the employee contests the tentative nonconfirmation as soon as possible



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after the Employer receives it.

4. If the employee contests a tentative nonconfirmation issued by DHS, the Employer will provide the employee with a referral letter and instruct the employee to contact DHS through its toll-free hotline (as found on the referral letter) within 8 Federal Government work days.

5. If the employee contests a tentative nonconfirmation based upon a photo non-match, the Employer will provide the employee with a referral letter to DHS. DHS will electronically transmit the result of the referral to the Employer within 10 Federal Government work days of the referral unless it determines that more than 10 days is necessary. The Employer agrees to check the E-Verify system regularly for case updates.

6. The Employer agrees that if an employee contests a tentative nonconfirmation based upon a photo non-match, the Employer will send a copy of the employee's Form I-551 or Form I-766 to DHS for review by:

- Scanning and uploading the document, or
- Sending a photocopy of the document by an express mail account (furnished and paid for by DHS).

7. The Employer understands that if it cannot determine whether there is a photo match/non-match, the Employer is required to forward the employee's documentation to DHS by scanning and uploading, or by sending the document as described in the preceding paragraph, and resolving the case as specified by the Immigration Services Verifier at DHS who will determine the photo match or non-match.

ARTICLE IV

SERVICE PROVISIONS

SSA and DHS will not charge the Employer for verification services performed under this MOU. The Employer is responsible for providing equipment needed to make inquiries. To access the E-Verify System, an Employer will need a personal computer with Internet access.

ARTICLE V

PARTIES

A. This MOU is effective upon the signature of all parties, and shall continue in effect for as long as the SSA and DHS conduct the E-Verify program unless modified in writing by the mutual consent of all parties, or terminated by any party upon 30 days prior written notice to the others. Any and all system enhancements to the E-Verify program by DHS or SSA, including but not limited to the E-Verify checking against additional data sources and instituting new verification procedures, will be covered under this MOU and will not cause the need for a supplemental MOU that outlines these changes. DHS agrees to train employers on all changes made to E-Verify through the use of mandatory refresher tutorials and updates to the E-Verify User Manual. Even without changes to E-Verify, DHS reserves the right to require employers to take



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mandatory refresher tutorials. An Employer that is a Federal contractor may terminate this MOU when the Federal contract that requires its participation in E-Verify is terminated or completed. In such a circumstance, the Federal contractor must provide written notice to DHS. If an Employer that is a Federal contractor fails to provide such notice, that Employer will remain a participant in the E-Verify program, will remain bound by the terms of this MOU that apply to non-Federal contractor participants, and will be required to use the E-Verify procedures to verify the employment eligibility of all newly hired employees.

B. Notwithstanding Article V, part A of this MOU, DHS may terminate this MOU if deemed necessary because of the requirements of law or policy, or upon a determination by SSA or DHS that there has been a breach of system integrity or security by the Employer, or a failure on the part of the Employer to comply with established procedures or legal requirements. The Employer understands that if it is a Federal contractor, termination of this MOU by any party for any reason may negatively affect its performance of its contractual responsibilities.

C. Some or all SSA and DHS responsibilities under this MOU may be performed by contractor(s), and SSA and DHS may adjust verification responsibilities between each other as they may determine necessary. By separate agreement with DHS, SSA has agreed to perform its responsibilities as described in this MOU.

D. Nothing in this MOU is intended, or should be construed, to create any right or benefit, substantive or procedural, enforceable at law by any third party against the United States, its agencies, officers, or employees, or against the Employer, its agents, officers, or employees.

E. Each party shall be solely responsible for defending any claim or action against it arising out of or related to E-Verify or this MOU, whether civil or criminal, and for any liability wherefrom, including (but not limited to) any dispute between the Employer and any other person or entity regarding the applicability of Section 403(d) of IIRIRA to any action taken or allegedly taken by the Employer.

F. The Employer understands that the fact of its participation in E-Verify is not confidential information and may be disclosed as authorized or required by law and DHS or SSA policy, including but not limited to, Congressional oversight, E-Verify publicity and media inquiries, determinations of compliance with Federal contractual requirements, and responses to inquiries under the Freedom of Information Act (FOIA).

G. The foregoing constitutes the full agreement on this subject between DHS and the Employer.

H. The individuals whose signatures appear below represent that they are authorized to enter into this MOU on behalf of the Employer and DHS respectively.



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To be accepted as a participant in E-Verify, you should only sign the Employer's Section of the signature page. If you have any questions, contact E-Verify at 888-464-4218.

Employer Whole Kids Outreach

Sr Anne Francioni

Name (Please Type or Print)

Title

Electronically Signed

Signature

04/27/2009

Date

Department of Homeland Security – Verification Division

USCIS Verification Division

Name (Please Type or Print)

Title

Electronically Signed

Signature

04/27/2009

Date



Company ID Number: 209296

Information Required for the E-Verify Program

Information relating to your Company:

Company Name: Whole Kids Outreach

Company Facility Address: 62143 HWY 21

Ellington, MO 63638

Company Alternate
Address:

County or Parish: REYNOLDS

Employer Identification

Number: 431839370

North American Industry
Classification Systems

Code: 624

Parent Company: Whole Kids Outreach

Number of Employees: 20 to 99

Number of Sites Verified

for: 1

Are you verifying for more than 1 site? If yes, please provide the number of sites verified for in each State:

- MISSOURI 1 site(s)



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Information relating to the Program Administrator(s) for your Company on policy questions or operational problems:

Name:	Susan Cooper	Fax Number:	(573) 663 - 2933
Telephone Number:	(573) 663 - 3257 ext. 19		
E-mail Address:	susmarcooper@gmail.com		

Name:	Christy Eunpu	Fax Number:	(573) 663 - 2933
Telephone Number:	(573) 663 - 3257 ext. 16		
E-mail Address:	christy@wholekidsoutreach.org		

Name:	Sr Anne Francioni	Fax Number:	(573) 663 - 3257
Telephone Number:	(573) 663 - 3257		
E-mail Address:	casassnd2@juno.com		

Name:	Connie Pendley	Fax Number:	(573) 663 - 2933
Telephone Number:	(573) 663 - 3257 ext. 14		
E-mail Address:	wkoradar@hotmail.com		

EXHIBIT L**Certification Regarding
Debarment, Suspension, Ineligibility and Voluntary Exclusion
Lower Tier Covered Transactions**

This certification is required by the regulations implementing Executive Order 12549, Debarment and Suspension, 29 CFR Part 98 Section 98.510, Participants' responsibilities. The regulations were published as Part VII of the May 26, 1988, Federal Register (pages 19160-19211).

(BEFORE COMPLETING CERTIFICATION, READ INSTRUCTIONS FOR CERTIFICATION)

- (1) The prospective recipient of Federal assistance funds certifies, by submission of this proposal, that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.
- (2) Where the prospective recipient of Federal assistance funds is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

Catholic Charities of Southern Missouri, Inc.

968136361

Company Name

DUNS # (if known)

Maura Taylor

Executive Director

Authorized Representative's Printed Name

Authorized Representative's Title


Authorized Representative's Signature

3/25/16

Date

Instructions for Certification

1. By signing and submitting this proposal, the prospective recipient of Federal assistance funds is providing the certification as set out below.
2. The certification in this clause is a material representation of fact upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective recipient of Federal assistance funds knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the Department of Labor (DOL) may pursue available remedies, including suspension and/or debarment.
3. The prospective recipient of Federal assistance funds shall provide immediate written notice to the person to which this proposal is submitted if at any time the prospective recipient of Federal assistance funds learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
4. The terms "covered transaction," "debarred," "suspended," "ineligible," "lower tier covered transaction," "participant," "person," "primary covered transaction," "principal," "proposal," and "voluntarily excluded," as used in this clause, have the meanings set out in the Definitions and Coverage sections of rules implementing Executive Order 12549. You may contact the person to which this proposal is submitted for assistance in obtaining a copy of those regulations.
5. The prospective recipient of Federal assistance funds agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the DOL.
6. The prospective recipient of Federal assistance funds further agrees by submitting this proposal that it will include the clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion - Lower Tier Covered Transactions," without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may but is not required to check the List of Parties Excluded from Procurement or Nonprocurement Programs.
8. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
9. Except for transactions authorized under paragraph 5 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the DOL may pursue available remedies, including suspension and/or debarment.

EXHIBIT M**MISCELLANEOUS INFORMATION****Outside United States:**

If any products and/or services offered under this RFP are being manufactured or performed at sites outside the United States, the vendor MUST disclose such fact and provide details in the space below or on an attached page.

Are any of the vendor's proposed products and/or services being manufactured or performed at sites outside the United States?	Yes _____	No <u> X </u>
If YES, do the proposed products/services satisfy the conditions described in section 4, subparagraphs 1, 2, 3, and 4 of Executive Order 04-09? (see the following web link: http://sl.sos.mo.gov/CMSImages/Library/Reference/Orders/2004/eo_04_009.pdf)	Yes _____	No _____
<p>If YES, mark the appropriate exemption below, and provide the requested details:</p> <p>1. _____ Unique good or service. • EXPLAIN: _____</p> <p>2. _____ Foreign firm hired to market Missouri services/products to a foreign country. • Identify foreign country: _____</p> <p>3. _____ Economic cost factor exists • EXPLAIN: _____</p> <p>4. _____ Vendor/subcontractor maintains significant business presence in the United States and only performs trivial portion of contract work outside US. • Identify maximum percentage of the overall value of the contract, for any contract period, attributed to the value of the products and/or services being manufactured or performed at sites outside the United States: _____ % • Specify what contract work would be performed outside the United States: _____</p>		

Employee/Conflict of Interest:

Vendors who are elected or appointed officials or employees of the State of Missouri or any political subdivision thereof, serving in an executive or administrative capacity, must comply with sections 105.450 to 105.458, RSMo, regarding conflict of interest. If the vendor or any owner of the vendor's organization is currently an elected or appointed official or an employee of the State of Missouri or any political subdivision thereof, please provide the following information:	
Name and title of elected or appointed official or employee of the State of Missouri or any political subdivision thereof:	
If employee of the State of Missouri or political subdivision thereof, provide name of state agency or political subdivision where employed:	
Percentage of ownership interest in vendor's organization held by elected or appointed official or employee of the State of Missouri or political subdivision thereof:	_____ %

EXHIBIT M, continued**Registration of Business Name (if applicable) with the Missouri Secretary of State:**

The vendor should indicate the vendor's charter number and company name with the Missouri Secretary of State. Additionally, the vendor should provide proof of the vendor's good standing status with the Missouri Secretary of State. If the vendor is exempt from registering with the Missouri Secretary of State pursuant to section 351.572, RSMo., identify the specific section of 351.572 RSMo., which supports the exemption.

<i>Charter Number (if applicable)</i> N00984333	<i>Company Name</i> Catholic Charities of Southern Missouri, Inc.
If exempt from registering with the Missouri Secretary of State pursuant to section 351.572 RSMo., identify the section of 351.572 to support the exemption:	

CERTIFICATE OF GOOD STANDING

STATE OF MISSOURI



Jason Kander
Secretary of State

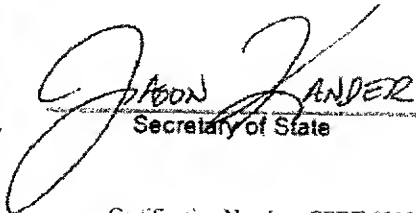
CORPORATION DIVISION
CERTIFICATE OF GOOD STANDING

I, JASON KANDER, Secretary of State of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

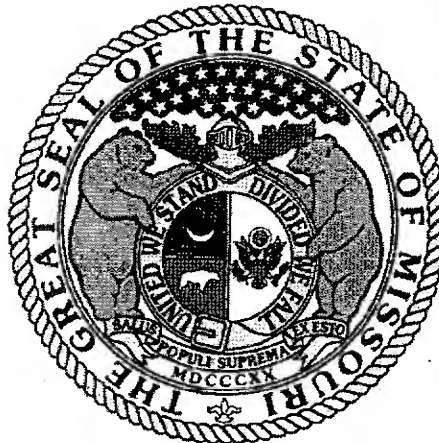
Catholic Charities of Southern Missouri, Inc.
N00984333

was created under the laws of this State on the 24th day of July, 2009, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 10th day of March, 2016.


Secretary of State

Certification Number: CERT-03102016-0010



EXAMPLES OF EDUCATIONAL MATERIALS

Training and Educational Resources

1. Understanding Pregnancy	InJoy Birth & Parenting Education
2. Better Breastfeeding (DVD booklet)	InJoy Birth & Parenting Education
3. Better Breastfeeding: A Guide for Teen Parents	InJoy Birth & Parenting Education
4. Mother and New Baby Care (DVD booklet)	InJoy Birth & Parenting Education
5. Never Shake: Preventing Shaken Baby Syndrome	Children's Trust Fund
6. Newborn Care: A Guide to the First Six Weeks	InJoy Birth & Parenting Education
7. Safe Sleep For Your Baby	Children's Trust Fund
8. Safety Starts at Home: The Essential Childproofing Guide	InJoy Birth & Parenting Education
9. The Dad Difference, Vol. 1: Baby Basics	InJoy Birth & Parenting Education
10. The Dad Difference, Vol. 2: Involved From the Start	InJoy Birth & Parenting Education
11. Understanding Birth (DVD booklet)	InJoy Birth & Parenting Education
12. Understanding Pregnancy: A Comprehensive Guide (DVD booklet)	InJoy Birth & Parenting Education
13. Breast Feeding-DVD	InJoy Birth and Parenting Education
14. Crib Safety-Pamphlet Prevention	Mo. Foundation for Child Abuse
15. Fetal Alcohol Syndrome	Pamphlet Child Birth Graphics
16. Home Safety	InJoy Birth and Parenting Education
17. Importance of Folic Acid	Pamphlet March of Dimes Association
18. Never Leave Child alone in Car or anywhere	Pamphlet, Children Trust Funds
19. Shaken Baby Syndrome DVD	DHISS
20. Vaccinations	Pamphlet, MO Health Services

LifeHouse Crisis Maternity Home Curriculum**Heritage House - Earn While You Learn****Education Module Record**

Name: _____

Date Assigned/Completed

- ____/____ **Module 1.1** 1st trimester
- ____/____ **Module 1.2** Prenatal Care
- ____/____ **Module 1.3** Eating for Two
- ____/____ **Module 1.4** Going It Alone
- ____/____ **Module 1.5** Your Developing Baby
- ____/____ **Module 1.6** Adoption
- ____/____ **Module 2.1:** Smoking (any new resident who smokes)
- ____/____ **Module 2.2:** Ultrasound (Week 16-20, week before US)
- ____/____ **Module 2.3:** What's Safe, What Isn't (first week of residence)
- ____/____ **Module 2.4:** Bonding With Unborn Baby- 2nd Trimester (weeks 12 and beyond)
- ____/____ **Module 2.5:** Your Changing Body (first trimester, weeks 0-15)
- ____/____ **Module 3.1:** 2nd Trimester (weeks 13-28)
- ____/____ **Module 3.2:** Understanding Baby's Cry Part 1
- ____/____ **Module 3.3:** Secret World: Senses (2nd trimester, weeks 13-28)
- ____/____ **Module 3.4:** Safe Sleep (weeks 29-40 or any resident who has an infant < 1 year)
- ____/____ **Module 3.5:** Understanding Baby's Cry Part 2
- ____/____ **Module 4.1:** Pregnancy, the Third Trimester (weeks 29-40)
- ____/____ **Module 4.2:** Getting Ready for Baby (weeks 36-40)
- ____/____ **Module 4.3:** Eye Contact Means Love (weeks 36-newborn)
- ____/____ **Module 4.4:** Infant Temperament (weeks 36-newborn)
- ____/____ **Module 4.5:** Importance of Bonding (weeks 36-newborn)
- ____/____ **Module 5.1:** Infant Massage (weeks 38- 1st month)

- ☐/ ☐ **Module 5.2: Newborn Care (weeks 36-40)**
- ☐/ ☐ **Module 5.3: Bathing and Sleep**
- ☐/ ☐ **Module 5.4: Caring for Yourself (weeks 36-40)**
- ☐/ ☐ **Module 5.5: The First Years Last Forever (Newborn and beyond)**
- ☐/ ☐ **Module 6.1: The Parent/Child Relationship (Newborn and beyond)**
- ☐/ ☐ **Module 6.2: Safe From the Start (Newborn and beyond)**
- ☐/ ☐ **Module 6.3: Parenting with Respect**
- ☐/ ☐ **Module 6.4: Quality Child Care (any resident who needs childcare)**
- ☐/ ☐ **Module 6.5: Learning Through Play**
- ☐/ ☐ **Module 7.1: Emergency First Aid (Infant and beyond)**
- ☐/ ☐ **Module 7.2: Emergency First Aid- Illness (Infant and beyond)**
- ☐/ ☐ **Module 7.3: Car Seat Safety (36 weeks-newborn)**
- ☐/ ☐ **Module 7.4: Your Baby Can Sleep (Infant 7-9 months)**
- ☐/ ☐ **Module 7.5: Discipline (infants 7-9 months)**
- ☐/ ☐ **Module 8.1: Food for Growth (Infants over 4-6 months or already formula feeding)**
- ☐/ ☐ **Module 8.2: Breastfeeding Your Baby (36 weeks- newborn)**
- ☐/ ☐ **Module 8.3: Your Baby's Development (newborn-6 months)**
- ☐/ ☐ **Module 8.4: Preventing Sexual Abuse (close to discharge or children in childcare)**
- ☐/ ☐ **Module 8.5: Shaken Baby Syndrome (36 weeks- infant)**
- ☐/ ☐ **Module 9.1: Postpartum: From Pregnant to Parent (36 weeks- 2 weeks postpartum)**
- ☐/ ☐ **Module 9.2: Your Healthy Baby (3-6 months)**
- ☐/ ☐ **Module 9.3: Ready to Learn (36 weeks- 6 months)**
- ☐/ ☐ **Module 9.4: Happiest Baby on the Block (36 weeks- newborn)**
- ☐/ ☐ **Module 9.5: Toilet Training (beyond 2 years)**
- ☐/ ☐ **Module 10.1: Goals and Benefits of Breastfeeding (28- 40 weeks)**
- ☐/ ☐ **Module 10.2: Techniques and Good Latch (32- 40 weeks)**
- ☐/ ☐ **Module 10.3: Getting Enough Milk (36- 40 weeks)**
- ☐/ ☐ **Module 10.4: Grow Spurts and Essentials**

___/___ **Module 10.5:** Returning to Work (when resident plans to return to work)

___/___ **Module 11.1:** Introductions and Options (36-40 weeks)

___/___ **Module 11.2:** Interventions and Labor (36-40 weeks)

___/___ **Module 11.3:** Moving Through Labor (36-40 weeks)

___/___ **Module 11.4:** What to Expect (36- 40 weeks)

___/___ **Module 11.5:** Infant Care (36- 40 weeks)

___/___ **Module 12.1** Introduction to Developmental Milestones

___/___ **Module 12.2** Newborn Milestones

___/___ **Module 12.3** 3-6 Month Milestones

___/___ **Module 12.4** 6-9 Month Milestones

___/___ **Modules 12.5** 12 Month Milestones



State of Missouri ▼


Karen Herman ▼

View Suppliers and Documents : RFPS30034901600477 - Alternatives to Abortion Program Services (Formal)

Review supplier list and any document attachment submitted by suppliers for Formal Solicitation
RFPS30034901600477

Evaluation Notes

Supplier	Attachments
3M Company (n/a)	
Access II Independent Living Center (n/a)	
Active Parenting Publishers, Inc (n/a)	
Adoption and Foster Care Coalition of MO (n/a)	
Aetna Medicaid Administrators LLC (n/a)	
All Generations Adult Day Center LLC (n/a)	
Alliance for Life - Missouri Inc (n/a) [Add Attachments]	
American Healthways Services LLC (n/a)	
Angela DeWilde (n/a)	
Annette M Maskrod (n/a)	
Annie Malone Children and Family Service Center (n/a)	
Annie Malone Children and Family Service Center (n/a)	
Ascend Management Innovations LLC (n/a)	
Beauty By Design (n/a)	
Behavioral Innovations (n/a)	

Supplier	Attachments
BFT Holding Corp (n/a)	
Big Brothers Big Sisters of Central Missouri (n/a)	
Big Brothers Big Sisters of Eastern Missouri (n/a)	
Birthright Counseling St Louis (n/a)	
Caring Community Services, LLC (n/a)	
CaringLegends LLC (n/a)	
Catholic Charities of Southern Missouri (n/a) [Add Attachments]	
Challenge n Change, Inc. (n/a)	
Child Abuse Neglect Emergency Shelter Inc (n/a)	
Childrens Therapy Center of Pettis County Inc (n/a)	
Choices for People Center for Citizens With Disabi (n/a)	
Christian Hospital Northeast-Northwest (n/a)	
CIMRO (n/a)	
Clay County Health Department (n/a)	
ClientTrack Inc (n/a)	
Community Action Partnership of Greater St Joseph (n/a)	
Community Counseling Center (n/a)	
Community Response Independent Living Program Inc (n/a)	
Cornerstones of Care (n/a)	
County of Andrew-Health Department (n/a)	
Creative Therapy Solutions (n/a)	
Crittenton (n/a)	
CROFFORDS CLEANING LLC (n/a)	